
State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

Filing at a Glance

Company:	ISMIE Mutual Insurance Company
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing
State:	Illinois
TOI:	11.2 Med Mal-Claims Made Only
Sub-TOI:	11.2023 Physicians & Surgeons
Filing Type:	Rate/Rule
Date Submitted:	08/10/2012
SERFF Tr Num:	ISMI-128631382
SERFF Status:	Closed-Filed
State Tr Num:	ISMI-128631382
State Status:	
Co Tr Num:	ISMIE 0000-69
Effective Date	10/01/2012
Requested (New):	
Effective Date	
Requested (Renewal):	
Author(s):	Jacinth Adams, Gina Bules
Reviewer(s):	Gayle Neuman (primary)
Disposition Date:	10/02/2012
Disposition Status:	Filed
Effective Date (New):	
Effective Date (Renewal):	
State Filing Description:	

State: Illinois
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons
Product Name: ISMIE Mutual 10/1/2012 Rule and Rate Filing
Project Name/Number: October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69

General Information

Project Name: October 1, 2012 Manual of Rules and Rates
Project Number: ISMIE 0000-69

Status of Filing in Domicile: Pending

Domicile Status Comments: We are submitting for review and approval an update to our Manual of Rules and Rates effective October 1, 2012. Affected pages, actuarial information and cover letter are in Supporting Documentation.

Reference Organization: N/A

Reference Number: N/A

Reference Title: N/A

Advisory Org. Circular: N/A

Filing Status Changed: 10/02/2012

State Status Changed:

Deemer Date:

Created By: Jacinth Adams

Submitted By: Jacinth Adams

Corresponding Filing Tracking Number:

Filing Description:

Updated Manual of Rules and Rates, effective October 1, 2012. This filing supersedes our present filing and applies to all policies issued on or renewed October 1, 2012.

Company and Contact

Filing Contact Information

Jacinth Adams, Senior Support Manager jacinthadams@ismie.com
20 N. Michigan Avenue 312-580-2498 [Phone]
Suite 700 312-782-2023 [FAX]
Chicago, IL 60602

Filing Company Information

ISMIE Mutual Insurance Company	CoCode: 32921	State of Domicile: Illinois
20 N. Michigan Avenue	Group Code: 2358	Company Type: P&C Medical
Suite 700	Group Name:	Malpractice
Chicago, IL 60602	FEIN Number: 36-2883612	State ID Number:
(800) 782-4764 ext. [Phone]		

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

Per Company: Yes

Company	Amount	Date Processed	Transaction #
ISMIE Mutual Insurance Company	\$0.00	08/10/2012	

State Specific

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
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Refer to our checklists prior to submitting filing (http://www.idfpr.com/DOI/Prop_Cas_IS3_Checklists/IS3_Checklists.htm): JEA
Refer to our updated (04/06/2007) SERFF General Instructions prior to submitting filing. They have been updated to clarify what rates and rules are required to be filed as well as what rates and rules are not required to be filed. Also, the "Product Name" is the Filing Title and not the Project Number.: JEA

NO RATES and/or RULES ARE REQUIRED TO BE FILED FOR LINES OF COVERAGE SUCH AS COMMERCIAL AUTO (except taxicabs), BURGLARY AND THEFT, GLASS, FIDELITY, SURETY, COMMERCIAL GENERAL LIABILITY, CROP HAIL, COMMERCIAL PROPERTY, DIRECTORS AND OFFICERS, ERRORS AND OMISSIONS, COMMERCIAL MULTI PERIL just to mention a few. However, a Summary Sheet (RF-3) is required to be filed. Please refer to the State Specific Field below for what rates/rules are required to be filed and to our checklists for specific statutes, regulations, etc. :

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp : JEA

Medical Malpractice rates/rules may now be submitted using SERFF effective January 1, 2012.: JEA

The only rates and/or rules that are required to be filed are Homeowners, Mobile Homeowners, Dwelling Fire and Allied Lines, Workers' Compensation, Liquor Liability, Private Passenger Automobiles, Taxicabs, Motorcycles and Group Inland Marine Insurance which only applies to insurance involving personal property owned by, being purchased by or pledged as collateral by individuals, and not used in any business, trade or profession per Regulation Part 2302 which says in part, "each company shall file with the Director of Insurance each rate, rule and minimum premium before it is used in the State of Illinois.": JEA

When selecting a form filing type for a multiple form filing, use the dominant type from these choices: APP - application; CER - certificate; COF - coverage form; DPS - declaration page; END - endorsement; POJ - policy jacket; ORG - Companies adopting an Advisory or Rating Organization's filing. Example: If you are submitting a policy as well as endorsements, a declaration page and an application, you would select "POL" for policy.: N/A

SERFF Tracking #:	ISMI-128631382	State Tracking #:	ISMI-128631382	Company Tracking #:	ISMIE 0000-69
State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company		
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons				
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing				
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69				

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed	Gayle Neuman	10/02/2012	10/02/2012

Objection Letters and Response Letters

Objection Letters

Status	Created By	Created On	Date Submitted
Pending Industry Response	Gayle Neuman	08/20/2012	08/20/2012
Pending Industry Response	Gayle Neuman	08/15/2012	08/15/2012

Response Letters

Responded By	Created On	Date Submitted
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Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Effective Date	Note To Reviewer	Jacinth Adams	10/01/2012	10/01/2012
effective date	Note To Filer	Gayle Neuman	10/01/2012	10/01/2012

SERFF Tracking #:	ISMI-128631382	State Tracking #:	ISMI-128631382	Company Tracking #:	ISMIE 0000-69
State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company		
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons				
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing				
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69				

Disposition

Disposition Date: 10/02/2012
Effective Date (New): 10/01/2012
Effective Date (Renewal): 10/01/2012
Status: Filed
Comment:

Rate data does NOT apply to filing.

State: Illinois **Filing Company:** ISMIE Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons
Product Name: ISMIE Mutual 10/1/2012 Rule and Rate Filing
Project Name/Number: October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	08/20/2012
Submitted Date	08/20/2012
Respond By Date	08/27/2012

Dear Jacinth Adams,

Introduction:

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

There is nothing included in the filing to explain the codes contained in each of the classes.

Conclusion:

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,

Gayle Neuman

State: Illinois **Filing Company:** ISMIE Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons
Product Name: ISMIE Mutual 10/1/2012 Rule and Rate Filing
Project Name/Number: October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	08/21/2012
Submitted Date	08/21/2012

Dear Gayle Neuman,

Introduction:

This is to respond to your inquiry regarding our 10/1/2012 rate and rule filing.

Response 1

Comments:

In response to your objection regarding the identification of the specialty codes included in our class relativity changes, I am attaching a document titled Specialty Classes that lists the specialties in Class 12, Class 14, and Class 15.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Please let us know if you need any additional information for this filing.

Sincerely,

Jacinth Adams

State: Illinois **Filing Company:** ISMIE Mutual Insurance Company
TOI/Sub-TOI: 11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons
Product Name: ISMIE Mutual 10/1/2012 Rule and Rate Filing
Project Name/Number: October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69

Objection Letter

Objection Letter Status	Pending Industry Response
Objection Letter Date	08/15/2012
Submitted Date	08/15/2012
Respond By Date	08/29/2012

Dear Jacinth Adams,

Introduction:

This is to acknowledge receipt of your filing. Your submission is not acceptable for filing in Illinois due to the following reasons:

Pursuant to 50 Ill. Adm. Code 754.10, identification of all changes in all superseding filings, as well as identification of all superseded filings is required. Changes made under Appendix III were simply identified as "adjustments have been made to the following paragraphs...". Please highlight text that was added and overscore text that was removed/replaced.

Conclusion:

Sign up to get e-mail notification for updates to the Department's website. <http://insurance.illinois.gov/RSS/>

Please refer to the appropriate Property Casualty IS3 Review Requirements Checklist before submitting any filing. The checklists are available at the Department's Web site or at the following link:

http://insurance.illinois.gov/Prop_Cas_IS3_Checklists/IS3_Checklists.asp

Please submit compliant form(s) no later than the date shown above or the entire filing may be disapproved. Please be advised that when the Director disapproves the form(s) you must immediately cease using the form(s) in Illinois.

Please give this matter your immediate attention. If you have any question regarding this filing please feel free to contact me.

Sincerely,

Gayle Neuman

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

Response Letter

Response Letter Status	Submitted to State
Response Letter Date	08/15/2012
Submitted Date	08/15/2012

Dear Gayle Neuman,

Introduction:

Thank you for acknowledging receipt of our Manual of Rules and Rates filing effective 10/1/2012.

Response 1

Comments:

We have added, in addition to the filing cover letter, the working copy of the the extensive revisions made to Appendix III. New text is highlighted in color and all removed text is clearly overscored.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Please let us know if you need any additional information.

Sincerely,

Jacinth Adams

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

Note To Reviewer

Created By:

Jacinth Adams on 10/01/2012 02:20 PM

Last Edited By:

Jacinth Adams

Submitted On:

10/01/2012 02:20 PM

Subject:

Effective Date

Comments:

In response to your note, I am confirming the effective date of October 1, 2012 for our Manual of Rules and Rates.

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

Note To Filer

Created By:

Gayle Neuman on 10/01/2012 02:03 PM

Last Edited By:

Gayle Neuman

Submitted On:

10/01/2012 02:03 PM

Subject:

effective date

Comments:

The Department of Insurance has now completed its review of the filing referenced above. Originally, ISMIE Mutual requested the filing be effective October 1, 2012. Was the filing put in effect on October 1, 2012 or do you wish to have a different effective date? Your prompt response is appreciated.

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

Supporting Document Schedules

		Item Status:	Status Date:
Satisfied - Item:	Explanatory Memorandum		
Comments:	Actuarial filing memorandum attached. Please also see cover letter for a conscise description of changes in Manual.		
Attachment(s):			
filing memorandum--final.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Form RF3 - (Summary Sheet)		
Comments:	RF-3 Attached		
Attachment(s):			
Rf-3.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Certification		
Comments:	Statement of Actuarial Opinion is attached. See cover letter for company officer certification.		
Attachment(s):			
statement of actuarial opinion.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Manual		
Comments:	Affected pages of the manual that have been changed are attached in this file.		
Attachment(s):			
affected pages10-1-2012 MRR.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter for MRR		
Comments:	Cover letter which details all changes to Manual.		
Attachment(s):			

State:	Illinois	Filing Company:	ISMIE Mutual Insurance Company
TOI/Sub-TOI:	11.2 Med Mal-Claims Made Only/11.2023 Physicians & Surgeons		
Product Name:	ISMIE Mutual 10/1/2012 Rule and Rate Filing		
Project Name/Number:	October 1, 2012 Manual of Rules and Rates/ISMIE 0000-69		

MRR Cover Letter.pdf

APPENDIX III SCworking Revise (4) (2).pdf

		Item Status:	Status Date:
Satisfied - Item:	Cover Letter for MRR		
Comments:	Cover letter which details all changes to Manual.		
Attachment(s):			
MRR Cover Letter.pdf			

		Item Status:	Status Date:
Satisfied - Item:	Specialty Codes/Classes		
Comments:			
Attachment(s):			
Specialty Classes.pdf			

July 24, 2012

Mr. John Washburn
Senior Vice President
ISMIE Mutual Insurance Company
20 N. Michigan Avenue
Suite 700
Chicago, Illinois 60602-4822

Dear Mr. Washburn:

Illinois Physicians and Surgeons Professional Liability Filing

Attached is a filing memorandum describing the proposed changes to ISMIE Mutual Insurance Company's (ISMIE or Company) physicians and surgeons professional liability class plan and territory plan in Illinois. This letter and attached filing memorandum describe the data, methodology, and assumptions used in developing these rates.

This analysis has been prepared for the internal use of ISMIE as a guide for rates effective October 1, 2012. A copy may also be provided to the Illinois Insurance Department regarding the Company's proposed changes. In addition, ISMIE may provide a copy to reinsurers in connection with contract renewal discussions. Permission is hereby granted for such distribution on the conditions that:

- Towers Watson is provided a list of the Recipients to whom this report is provided
- The report is distributed in its entirety
- Each Recipient recognizes that Towers Watson is available, at the expense of ISMIE, to answer any questions concerning the report
- Each Recipient agrees not to reference or distribute the report to any other party
- Each Recipient recognizes that the furnishing of this report is not a substitute for its own due diligence and agrees to place no reliance on this report or the data contained herein that would result in the creation of any duty or liability by Towers Watson to such party
- In the event that the Recipient is required by order of a court of competent jurisdiction, administrative agency or governmental body, or by any law, rule, regulation, subpoena, or any other administrative or legal process to disclose this report, the Recipient may disclose this report without liability hereunder, provided that the Recipient gives Towers Watson prompt notice of any such requirement and, at our discretion, either (1) cooperates with us, at our expense, to prohibit such disclosure, or (2) uses all reasonable efforts to get confidential treatment of this report under a protective order or other appropriate mechanism. Furthermore, the Recipient may reference or disclose this report without liability hereunder in the event that such reference or distribution is required by professional standards bodies.

- Each Recipient understands that such RECIPIENT IS DEEMED TO HAVE ACCEPTED THESE TERMS AND CONDITIONS by retaining a copy of this report

No further distribution of this report or reference, either oral or written, to Towers Watson, our analysis or findings related to this report may be made without our prior written consent.

In performing our analysis, we relied without audit or verification upon the data provided by ISMIE Mutual Insurance Company.

Because of the uncertainties underlying medical malpractice rates, there can be no guarantee that the attached rates will prove to be adequate or not excessive. We believe, however, that the methods used are reasonable in the current circumstances.

We are members of the American Academy of Actuaries and meet its qualification standards for signing this report.

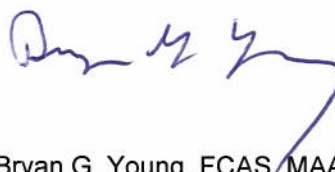
If you should have questions, please call.

Sincerely,



James D. Hurley, ACAS, MAAA
Direct Dial: 404.365.1632

JDH/BGY:ds



Bryan G. Young, FCAS, MAAA
Direct Dial: 404.365.1635

ISMIE Mutual Insurance Company**Physicians and Surgeons Professional Liability Filing
Revisions to Territory and Class Plan****Illinois**

This memorandum and attached Exhibits present support for revisions to the current physicians and surgeons professional liability territory and class plan proposed to be effective October 1, 2012 for ISMIE Mutual Insurance Company (ISMIE). The revisions are based on review of indicated relativities reflecting ISMIE Illinois experience valued as of March 31, 2012 at \$1 million limits by territory/county and class/specialty. Indicated relativities reflect pure premiums calculated using reported indemnity and ALAE by year for each specialty and county.

Details and descriptions of the development and/or source for each of these elements is described below and documented in the attached exhibits. A summary of the changes and indications supporting the changes are provided in the Exhibits.

Summary

Exhibit C, Sheet 2 contains the indications and supporting data underlying the proposed county reassignment and territory relativity changes. ISMIE proposes reassigning two counties to different territories and revising relativities for two territories (2 and 2B). Indicated relativities for the 1991-2010 and 2001-2010 periods are shown for the subject counties. The current and proposed relativities and calculation of the impact of the changes are shown on Exhibit C, Sheet 1. Based on the current in-force distribution the estimated off-balance of the proposed territory changes is -0.2%.

Exhibit B, Sheet 2 contains the indications and supporting data underlying the specialty reassignments and class relativity changes. Three specialties are assigned to different classes and relativities for three classes are revised. Indicated relativities for the 1991-2010 and 2001-2010 periods are shown for the subject specialties and classes. The current and proposed relativities and calculation of the impact of the changes are shown on Exhibit B, Sheet 1. Based on the current in-force exposure distribution, the estimated off-balance created by the proposed class plan changes is -1.1%.

The combined estimated effect of the class and territory changes produces an off-balance of -1.3% as shown on Exhibit A. To correct for this, ISMIE is making a rebalancing adjustment to the base rate so that the class/territory revisions produce no change in overall collected premium, i.e. the changes are revenue neutral. The impact of these changes is consistent with the company's experience and reasonable to the circumstances.

Analysis

For the territory/county work on Exhibit C, indicated territory/county relativities are based on historical indicated pure premiums. The reported indemnity and ALAE loss experience at March 31, 2012 are summarized by territory/county and by report year. Base class equivalent exposures are used to estimate report year exposures by county and by year. First, the exposures are organized into an accident by report year format and then a report year lag pattern is applied yielding report year exposures. The report year indemnity and ALAE are divided by the report year exposures deriving an implied pure premium by county and year. The pure premiums by county and year are compared to the base territory (ISMIE's Territory 1) pure premium to determine the implied county relativities by year. The long term implied relativities are calculated using an exposure weighted average across the two time periods to obtain indicated relativities. Exhibit C, Sheet 2 summarizes the indicated and current relativities for each county for which a change in assignment or relativity is proposed. The raw indications are supplemented by a credibility weighted indicated relativity based on the respective number of exposures for the two experience periods.

A procedure similar to that used to calculate territory/county relativities is applied in developing relativities for class/specialty indications on Exhibit B, Sheet 2. However, the losses are summarized by class/specialty rather than by territory/county and the program year exposures are base territory equivalents. The same procedure is followed summarizing by class/specialty rather than by territory/county and the base class (ISMIE's Class 5) rather than base territory is used in calculating the base pure premium for determining the indicated relativities.

ISMIE MUTUAL INSURANCE COMPANY

Overall Impact
\$1,000,000 Limits

(1)	Class Plan Impact	-1.1%
(2)	Territory Plan Impact	-0.2%
(3)	Overall Impact	-1.3%

- Notes: (1) Exhibit B, Sheet 1, Item (7).
(2) Exhibit C, Sheet 1, Item (7).
(3) $[100\% + (1)] \times [100\% + (2)] - 100\%$.

ISMIE MUTUAL INSURANCE COMPANY

Specialty Assignments and Class Relativity Changes
Overall Impact

	Class		In-Force Distribution		Relativity	
	Current (1)	Proposed (2)	Current (3)	Proposed (4)	Current (5)	Proposed (6)
AH	AH	AH	1.9%	1.9%	0.069	0.069
-1	-1	-1	2.0%	2.0%	0.080	0.080
0	0	0	0.0%	0.0%	1.282	1.282
1	1	1	2.7%	2.7%	0.400	0.400
2	2	2	7.8%	15.8%	0.550	0.550
3	3	3	9.0%	1.1%	0.600	0.600
4	4	4	13.6%	13.6%	0.850	0.850
5	5	5	13.7%	13.7%	1.000	1.000
6	6	6	3.7%	3.7%	0.950	0.950
7	7	7	5.7%	5.7%	1.100	1.100
8	8	8	8.5%	8.5%	1.250	1.250
9	9	9	6.5%	6.5%	1.050	1.050
10	10	10	1.5%	1.5%	1.450	1.450
11	11	11	0.4%	0.4%	1.600	1.600
12	12	12	1.9%	1.9%	1.800	1.700
13	13	13	0.2%	0.2%	1.900	1.900
14	14	14	0.8%	0.8%	2.700	2.600
15	15	15	3.5%	3.5%	2.900	2.700
16	16	16	1.0%	1.0%	3.500	3.500
17	17	17	5.0%	5.0%	3.800	3.800
18	18	18	0.7%	0.7%	4.100	4.100
19	19	19	1.0%	1.0%	1.350	1.350
20	20	20	0.3%	0.3%	6.300	6.300
21	21	21	1.0%	1.0%	0.750	0.750
22	22	22	4.4%	4.4%	1.500	1.500
23	23	23	2.8%	2.8%	2.700	2.700
88046	88046	88046	0.3%	0.3%	1.315	1.315
88047	88047	88047	0.1%	0.1%	1.282	1.282
88048	88048	88048	0.0%	0.0%	0.100	0.100
Total					1.267	1.253
(7) Overall Impact					-1.1%	

Notes:

- (1),(2) Current and proposed specialty assignment changes.
(3),(4) Provided by ISMIE. Adjusted to reflect full-time equivalency, territory relativity, and maturity step-factor. Excludes auditable and corporate exposures.
(7) Total (6) / Total (5) - 1,000.

ISMIE MUTUAL INSURANCE COMPANY

Specialty Assignments and Class Relativity Changes
Indications

Specialty (1)	Class		Current In-Force Distribution (4)	1991-2010			2001-2010			Current Relativity (13)		
	Current (2)	Proposed (3)		Exposures (5)	Indicated Relativity (6)	Credibility (7)	Weighted Relativity (8)	Exposures (9)	Indicated Relativity (10)		Credibility (11)	Weighted Relativity (12)
80243	2	3	0.2%	246	1.702	0.111	0.678	171	2.403	0.093	0.721	0.550
80252	2	3	0.8%	708	0.822	0.188	0.601	491	0.805	0.157	0.590	0.550
80267	3	2	9.0%	11,413	0.514	0.755	0.535	6,469	0.368	0.569	0.468	0.600
	12	12	1.9%	2,275	1.227	0.337	1.607	1,377	1.104	0.262	1.617	1.800
	14	14	0.8%	1,632	2.108	0.286	2.531	840	1.182	0.205	2.389	2.700
	15	15	3.5%	4,234	2.034	0.460	2.502	2,453	1.783	0.350	2.509	2.900

Notes: (1) Class indications exclude experience of changed counties.

(2),(3) Current and proposed specialty assignment changes.

(4) Provided by ISMIE. Adjusted to reflect full-time equivalency, territory relativity, and maturity step-factor. Excludes auditable and corporate exposures.

(5) Provided by ISMIE.

(6) Based on 1991-2010 report year pure premiums.

(7) Credibility based on the square root of [(5) / 20,000] where 20,000 exposures is the full credibility standard with a maximum value of 1,000.

(8) $(7) \times (6) + [(1,000 - (7)) \times (13)]$.

(9) Provided by ISMIE.

(10) Based on 2001-2010 report year pure premiums.

(11) Credibility of the square root of [(9) / 20,000] where 20,000 exposures is the full credibility standard with a maximum value of 1,000.

(12) $(11) \times (10) + [(1,000 - (11)) \times (13)]$.

ISMIE MUTUAL INSURANCE COMPANY

County Assignments and Territory Relativity Changes
Overall Impact

Territory		In-Force Distribution		Relativity	
Current	Proposed	Current	Proposed	Current	Proposed
(1)	(2)	(3)	(4)	(5)	(6)
1	1	50.7%	49.9%	1.000	1.000
1A	1A	0.1%	0.1%	0.900	0.900
1B	1B	14.3%	8.0%	0.850	0.850
N/A	1C	N/A	0.8%	N/A	1.050
2	2	1.1%	7.4%	0.750	0.800
2A	2A	18.2%	18.2%	0.700	0.700
2B	2B	0.5%	0.5%	0.600	0.650
2C	2C	5.9%	5.9%	0.450	0.450
2D	2D	3.4%	3.4%	0.550	0.550
3	3	5.9%	5.9%	0.500	0.500
Total		Total		0.842	0.840
(7) Overall Impact		(7) Overall Impact		-0.2%	

Notes:

- (1),(2) Current and proposed territory assignment changes.
- (3),(4) Provided by ISMIE. Adjusted to reflect full-time equivalency, class relativity, and maturity step-factor. Excludes auditable and corporate exposures.
- (7) Total (6) / Total (5) - 1.000.

ISMIE MUTUAL INSURANCE COMPANY

County Assignments and Territory Relativity Changes Indications

County (1)	Territory		Current In-Force Distribution (4)	1991-2010			2001-2010			Current Relativity (13)		
	Current (2)	Proposed (3)		Exposures (5)	Indicated Relativity (6)	Credibility (7)	Weighted Relativity (8)	Exposures (9)	Indicated Relativity (10)		Credibility (11)	Weighted Relativity (12)
Madison Lake Kankakee Grundy	1	1C	0.8%	2,933	1.199	0.383	1,076	1,296	1.341	0.255	1.087	1.000
	1B	2	6.3%	16,130	0.777	0.898	0.785	8,913	0.705	0.668	0.753	0.850
	2	2	1.1%	2,609	0.958	0.361	0.825	1,393	1.007	0.264	0.818	0.750
	2B	2B	0.5%	1,182	0.879	0.243	0.668	770	1.011	0.196	0.681	0.600

Notes: (1) Territory indications exclude experience of changed specialties.

(2),(3) Current and proposed territory assignment changes.

(4) Provided by ISMIE. Adjusted to reflect full-time equivalency, class relativity, and maturity step-factor. Excludes auditable and corporate exposures.

(5) Provided by ISMIE.

(6) Based on 1991-2010 report year pure premiums.

(7) Credibility based on the square root of [(5) / 20,000] where 20,000 exposures is the full credibility standard with a maximum value of 1.000.

(8) $(7) \times (6) + [(1.000 - (7)) \times (13)]$.

(9) Provided by ISMIE.

(10) Based on 2001-2010 report year pure premiums.

(11) Credibility of the square root of [(9) / 20,000] where 20,000 exposures is the full credibility standard with a maximum value of 1.000.

(12) $(11) \times (10) + [(1.000 - (11)) \times (13)]$.

SUBSTITUTE FORM (RF-3)

SUMMARY SHEET

Change in rate level produced by rate revisions effective October 1, 2012.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)</u> ¹	(3) <u>Percentage Change</u> ²
II. Medical Malpractice	\$278,000,000	0.0%

This filing applies to medical liability insurance for physicians and medical corporations and partnerships in the State of Illinois.

The filing reflects changes in rate levels due to loss and loss expense projections and expense loading, together with revisions in class, territory, and limits relativities.

¹Estimated direct premiums, policy year 2011/2012.

²Percentage change in direct premiums expected for 2012/2013 versus direct premiums reported for 2011/2012.

ISMIE Mutual Insurance Company

By: _____

John Washburn
Senior Vice President
ISMIE Mutual Insurance Company

Dated: 7/26/2012

**STATEMENT OF ACTUARIAL OPINION
REGARDING ISMIE MUTUAL COMPANY
RATE FILING
(Effective October 1, 2012)**


I, James D. Hurley, am associated with Towers Watson and am a Member of the American Academy of Actuaries. I have been retained by ISMIE Mutual Insurance Company of Chicago, Illinois, with regard to the evaluation of the claims-made rate level and rating schedules effective October 1, 2012.

In making my evaluation, I have relied upon listings and summaries of data prepared by the Company. I performed no independent verification as to the accuracy of these data, other than checks for reasonableness. In other respects, my study included the formulation of the actuarial assumptions, methods, and actuarial calculations as I considered necessary in the circumstances.

In my opinion, the rates to be effective October 1, 2012 have been computed in accordance with accepted actuarial principles and are consistent with the Company's experience. I believe that the proposed rates meet the requirements of the insurance laws of the State of Illinois.

Documentation of the rate evaluation has been provided to ISMIE Mutual Insurance Company.

July 24, 2012


James D. Hurley
Associate, Casualty Actuarial Society
Member, American Academy of Actuaries

ISMIE

Mutual Insurance Company

The Physician-First Service Insurer

MANUAL OF RULES AND RATES

OCTOBER 1, 2012

**ISMIE MUTUAL INSURANCE COMPANY
MEDICAL PROFESSIONAL LIABILITY
CLAIMS MADE INSURANCE PLAN**

**ILLINOIS MANUAL OF RULES & RATES
(Effective October 1, 2012)**

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**ISMIE MUTUAL INSURANCE COMPANY
MEDICAL PROFESSIONAL LIABILITY
CLAIMS MADE INSURANCE PLAN**

**GENERAL RULES
(Effective October 1, 2012)**

I. GENERAL INSTRUCTIONS

This manual contains the rules and rates governing the underwriting of Physician, Professional Entity and Physician Clinic Professional Liability insurance written on a claims-made policy form.

Additional exposure risks, for which coverage is provided on or after the effective dates of any changes in this manual, either by endorsement of outstanding policies or by the issuance of separate policies, shall be written on the basis of the rates and rules in effect at the time the coverage is provided.

The following requirements shall be observed in the preparation of policies for insurance covered by this manual:

- A.** On policies issued to individual physicians or allied health personnel (separate limits), the NAMED INSURED shall be identified in the Declarations page by name and rating medical specialty.

Additional insureds shall be identified on attaching endorsements either by name (in the case of a covered sole shareholder medical corporation) or by number (in the case of designated Allied Health Personnel employees).

- B.** On policies issued to professional entities whose qualification for said policy is established in **Appendix II**, the NAMED INSURED shall be identified on the Declarations page by its legal name.

Additional insureds shall be identified on attaching endorsements either by name (in the case of a legal entity), or by number (in the case of designated Allied Health Personnel employees).

- C.** On policies issued to physician clinics (whose qualification for said policy is established in **Appendix IV**), the NAMED INSURED shall be identified on the Declarations page by its legal name.

ENDORSEMENTS AND FORMS USED IN THIS PLAN

XVII. ENDORSEMENTS AND FORMS USED IN THIS PLAN (Cont'd.)

<u>Form Number</u>	<u>Title</u>
CE-5511	Auditable/FTE Premium Endorsement
CE-1515-M	Suspended Coverage Endorsement for Military Duty
CE-3511-F	Auditable/FTE Facility Premium Endorsement
CE-5515	Suspended Coverage Endorsement
CE-5516	Extension of Suspended Coverage Endorsement
CE-5517	Deletion of Suspended Coverage Endorsement
CE-5518-1	Locum Tenens Coverage Endorsement
CE-5518-2	Historical Locum Tenens Coverage Endorsement
CE-5524-1	Surcharge Premium Adjustment
CE-5525-1	Reporting Endorsement "Total"
CE-5525-2	Reporting Endorsement "Installments"
CE-5544-1	Additional "Named Insured" Deletion Endorsement
CE-5546-2	Specified "Professional Services" Endorsement
CE-5547	Higher Limits for the Named Insured
CE-5548	"Named Insured" No Coverage Endorsement
CE-5553	Additional Insured Endorsement
CE-5554	Additional Named Insured with Sole Shareholder Corporation
CE-5555	Each and Every Limits Endorsement
CE-5556	FTE Implied Extension Endorsement
CE-5580-1	Practice Activity Exclusion Endorsement
L-2207	Medical Training Coverage
L-2214-2	Medical Director Waiver Endorsement
CE-5557	Limited Vicarious Liability, Shared Limits Endorsement
CE-5558	Limited Vicarious Liability, Shared Limits with Limited Separate Limit Coverage Endorsement

XVII. ENDORSEMENTS AND FORMS USED IN THIS PLAN (Cont'd.)

<u>Form Number</u>	<u>Title</u>
L-2217	Policy Cancellation Endorsement
L-2217-1	Policy Cancellation Endorsement
L-2229	Multi to Sole Shareholder Corporation Endorsement
L-2236	Governmental Activity Waiver Endorsement
L-2242	Self-Insured Retention (SIR) Endorsement – Indemnity Only
L-2243	Self-Insured Retention (SIR) Endorsement – Indemnity and Expense
L-2244	Deductible Endorsement – Indemnity Only
L-2245	Article II, Exclusions Amendment Endorsement Vicarious Liability-Buy Back Endorsement, Physician
L-2246	Article II, Exclusions Amendment Endorsement Vicarious Liability-Buy Back Endorsement, Non-Physician
L-2249	Cyber Liability Endorsement
L-2250	Cyber Liability Reporting Endorsement
L-2251-I	Cyber Liability Limits Change Endorsement
L-2252	Consent to Settle Endorsement
L-2500	Notice of Cancellation or Non-Renewal
M-117	Cancellation of Certificate Holder
M-118	Certificate of Insurance
PP-1215-A2	Application for Part-Time Rating Professional Liability Insurance

PREMIUM RATES

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1: COUNTIES Cook, Jackson, Saint Clair, Will

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	12,096	16,256	21,864
Anesthesiology	80151	29,004	39,932	53,708
Anesthesiology-Pain Management	80182	29,004	39,932	53,708
Bariatrics	81076	23,804	32,648	43,912
Cardiac Surgery-MRP, NMajS	82042	34,208	47,216	63,504
Cardiac Surgery	80141	92,744	129,164	190,128
Cardiovascular Disease-NMRP, NS	80255	26,404	36,288	48,808
Cardiovascular Disease-Spec. MRP	82058	34,208	47,216	63,504
Cardiovascular Disease-MRP	80281	40,712	56,320	75,752
Colon Surgery	85004	43,312	59,964	80,652
Dermatology	80256	15,996	21,720	29,212
Dermatology-Tumescent Liposuction Only	81087	23,804	32,648	43,912
Diabetes	80237	23,804	32,648	43,912
Emergency Medicine-NMajS, prim	80102	40,712	56,320	75,752
Emergency Medicine-MajS	80157	45,916	63,604	88,728
Endocrinology	80238	15,996	21,720	29,212
Family Practice-NMRP, NS	80239	23,804	32,648	43,912
Family Practice-MRP, NMajS	80273	36,808	50,860	68,408
Family Practice-not primarily MajS	83009	51,120	70,892	98,896
Forensic Medicine	80240	12,096	16,256	21,864
Gastroenterology	80241	34,208	47,216	63,504
General Practice-NMRP, NS	80242	23,804	32,648	43,912
General Practice-MRP, NMajS	80275	36,808	50,860	68,408
General Practice-NMajS, prim.	80117	51,120	70,892	98,896
General Surgery-NMRP	84076	23,804	32,648	43,912
General Surgery-MRP, NMajS	82074	34,208	47,216	63,504
General Surgery	80143	71,932	100,028	139,540
Geriatrics	80243	17,300	23,540	31,660
Gynecology-NMRP, NS	81050	27,704	38,112	51,260
Gynecology/Obstetrics-MRP, NMaj	80277	43,312	59,964	80,652
Gynecological Surgery	86053	45,916	63,604	88,728
Hand Surgery-MRP, NMajS	82044	34,208	47,216	63,504
Hand Surgery	80169	45,916	63,604	88,728

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1: COUNTIES Cook, Jackson, Saint Clair, Will

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	45,916	63,604	88,728
Hematology	80245	23,804	32,648	43,912
Hospitalist, Family Practice	81083	27,704	38,112	51,260
Hospitalist, Internal Medicine	81084	27,704	38,112	51,260
Hospitalist, Pediatrics	81085	27,704	38,112	51,260
Industrial Medicine	80233	23,804	32,648	43,912
Infectious Disease	80246	26,404	36,288	48,808
Internal Medicine-NMRP	80257	27,704	38,112	51,260
Internal Medicine-MRP	80284	34,208	47,216	63,504
Neonatology	83015	69,328	96,384	141,876
Nephrology-NMRP	80260	26,404	36,288	48,808
Nephrology-MRP	80287	30,304	41,752	56,156
Neurology	80261	34,208	47,216	63,504
Neurosurgery-NMRP,NMajS	81045	23,804	32,648	43,912
Neurosurgery-MRP,NMajS	82045	39,412	54,500	73,304
Neurosurgery-No Intracranial Surgery	86027	108,352	151,016	222,296
Neurosurgery	80152	165,588	231,144	350,184
Nuclear Medicine	80262	23,804	32,648	43,912
Obstetrical/Gynecological Surgery	80153	100,548	140,092	206,216
Occupational Medicine	80079	12,096	16,256	21,864
Oncology	80259	23,804	32,648	43,912
Ophthalmology-NS	80263	15,996	21,720	29,212
Ophthalmic Surgery	80114	23,804	32,648	43,912
Oral/Maxillofacial Surgery	86154	23,804	32,648	43,912
Orthopaedics-NMRP,NS	81057	23,804	32,648	43,912
Orthopaedics-MRP,NMajS	82025	34,208	47,216	63,504
Orthopaedic Surgery w/o Spine	86026	71,932	100,028	147,240
Orthopaedic Surgery w/Spine	80154	108,352	151,016	222,296
Otorhinolaryngology-NMRP,NS	80060	12,096	16,256	21,864
Otorhinolaryngology-MRP,NMajS	80291	34,208	47,216	63,504
Otorhinolaryngology; No Elective Plastic	80159	40,712	56,320	75,752
Otorhinolaryngology; Head/Neck	80155	45,916	63,604	88,728
Otorhinolaryngology; Other than Head/Neck	86155	69,328	96,384	141,876

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1: COUNTIES Cook, Jackson, Saint Clair, Will

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	15,996	21,720	29,212
Pediatrics-NMRP	80267	15,996	21,720	29,212
Pediatrics-MRP	80293	34,208	47,216	63,504
Physical Med. & Rehab.	80235	12,096	16,256	21,864
Plastic Surgery	80156	69,328	96,384	141,876
Podiatry, No Surgery	86601	15,996	21,720	29,212
Podiatry, Surgery	86602	30,304	41,752	56,156
Psychiatry	80249	15,996	21,720	29,212
Public Health & Preventive Med	80236	12,096	16,256	21,864
Pulmonary Diseases	80269	30,304	41,752	56,156
Radiology-NMRP	80253	30,304	41,752	56,156
Radiology-MRP	80280	34,208	47,216	63,504
Radiology-MajRP	83033	43,312	59,964	80,652
Radiation Oncology	87047	21,200	29,004	39,012
Rheumatology	80252	17,300	23,540	31,660
Sleep Medicine	81086	27,704	38,112	51,260
Thoracic Surgery-NMRP, NS	81065	23,804	32,648	43,912
Thoracic Surgery	80144	92,744	129,164	190,128
Urological Surgery	80145	39,412	54,500	73,304
Urology-MRP, NMajS	82040	34,208	47,216	63,504
Vascular Surgery-MRP,NMajS	82050	34,208	47,216	63,504
Vascular Surgery	80146	92,744	129,164	190,128
Physician, Clinical Practice Not Insurable	80086	2,420	3,252	4,372
Retired, Not in Practice	80179	2,420	3,252	4,372
Physician, No Clinical Practice	80085	2,420	3,252	4,372
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1: COUNTIES Cook, Jackson, Saint Clair, Will

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	12,096	16,256	21,864
Other, Specialty NOC	88002	15,996	21,720	29,212
Other, Specialty NOC	88003	17,300	23,540	31,660
Other, Specialty NOC	80268	23,804	32,648	43,912
Other, Specialty NOC	88005	27,704	38,112	51,260
Other, Specialty NOC	88006	26,404	36,288	48,808
Other, Specialty NOC	88007	30,304	41,752	56,156
Other, Specialty NOC	80294	34,208	47,216	63,504
Other, Specialty NOC	88009	29,004	39,932	53,708
Other, Specialty NOC	88010	39,412	54,500	73,304
Other, Specialty NOC	83041	43,312	59,964	80,652
Other, Specialty NOC	84042	45,916	63,604	88,728
Other, Specialty NOC	88013	51,120	70,892	98,896
Other, Specialty NOC	88014	69,328	96,384	141,876
Other, Specialty NOC	85043	71,932	100,028	147,240
Other, Specialty NOC	88016	92,744	129,164	190,128
Other, Specialty NOC	86044	100,548	140,092	206,216
Other, Specialty NOC	88018	108,352	151,016	222,296
Other, Specialty NOC	88019	36,808	50,860	68,408
Other, Specialty NOC	87045	165,588	231,144	350,184
Other, Specialty NOC	88021	21,200	29,004	39,012
Other, Specialty NOC	88022	40,712	56,320	75,752
Other, Specialty NOC	88023	71,932	100,028	139,540

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis	count	rate per procedure/encounter		
	code	/ FTE	\$1M/\$3M	\$2M/\$4M	
Emergency Medicine	80102	4,000	N/A	14.08	18.94
Anesthesiology	80151	800	N/A	49.92	67.14
Urgent Care	80239	6,000	N/A	5.44	7.32
Surgicenter	n/a	n/a	N/A	25.60	34.29

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1A: COUNTY Vermilion

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	11,056	14,800	19,908
Anesthesiology	80151	26,272	36,108	48,564
Anesthesiology-Pain Management	80182	26,272	36,108	48,564
Bariatrics	81076	21,592	29,552	39,748
Cardiac Surgery-MRP, NMajS	82042	30,956	42,664	57,384
Cardiac Surgery	80141	83,636	116,416	166,940
Cardiovascular Disease-NMRP, NS	80255	23,932	32,828	44,152
Cardiovascular Disease-Spec. MRP	82058	30,956	42,664	57,384
Cardiovascular Disease-MRP	80281	36,808	50,860	68,408
Colon Surgery	85004	39,152	54,136	72,812
Dermatology	80256	14,568	19,716	26,520
Dermatology-Tumescent Liposuction Only	81087	21,592	29,552	39,748
Diabetes	80237	21,592	29,552	39,748
Emergency Medicine-NMajS, prim	80102	36,808	50,860	68,408
Emergency Medicine-MajS	80157	41,492	57,416	80,096
Endocrinology	80238	14,568	19,716	26,520
Family Practice-NMRP, NS	80239	21,592	29,552	39,748
Family Practice-MRP, NMajS	80273	33,296	45,940	61,788
Family Practice-not primarily MajS	83009	46,176	63,972	89,240
Forensic Medicine	80240	11,056	14,800	19,908
Gastroenterology	80241	30,956	42,664	57,384
General Practice-NMRP, NS	80242	21,592	29,552	39,748
General Practice-MRP, NMajS	80275	33,296	45,940	61,788
General Practice-NMajS, prim.	80117	46,176	63,972	89,240
General Surgery-NMRP	84076	21,592	29,552	39,748
General Surgery-MRP, NMajS	82074	30,956	42,664	57,384
General Surgery	80143	64,908	90,192	125,816
Geriatrics	80243	15,736	21,356	28,724
Gynecology-NMRP, NS	81050	25,104	34,468	46,360
Gynecology/Obstetrics-MRP, NMaj	80277	39,152	54,136	72,812
Gynecological Surgery	86053	41,492	57,416	80,096
Hand Surgery-MRP, NMajS	82044	30,956	42,664	57,384
Hand Surgery	80169	41,492	57,416	80,096

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1A: COUNTY Vermilion

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	41,492	57,416	80,096
Hematology	80245	21,592	29,552	39,748
Hospitalist, Family Practice	81083	25,104	34,468	46,360
Hospitalist, Internal Medicine	81084	25,104	34,468	46,360
Hospitalist, Pediatrics	81085	25,104	34,468	46,360
Industrial Medicine	80233	21,592	29,552	39,748
Infectious Disease	80246	23,932	32,828	44,152
Internal Medicine-NMRP	80257	25,104	34,468	46,360
Internal Medicine-MRP	80284	30,956	42,664	57,384
Neonatology	83015	62,564	86,916	124,636
Nephrology-NMRP	80260	23,932	32,828	44,152
Nephrology-MRP	80287	27,444	37,748	50,772
Neurology	80261	30,956	42,664	57,384
Neurosurgery-NMRP,NMajS	81045	21,592	29,552	39,748
Neurosurgery-MRP,NMajS	82045	35,640	49,220	66,200
Neurosurgery-No Intracranial Surgery	86027	97,688	136,084	195,144
Neurosurgery	80152	149,196	208,200	306,888
Nuclear Medicine	80262	21,592	29,552	39,748
Obstetrical/Gynecological Surgery	80153	90,660	126,252	181,044
Occupational Medicine	80079	11,056	14,800	19,908
Oncology	80259	21,592	29,552	39,748
Ophthalmology-NS	80263	14,568	19,716	26,520
Ophthalmic Surgery	80114	21,592	29,552	39,748
Oral/Maxillofacial Surgery	86154	21,592	29,552	39,748
Orthopaedics-NMRP,NS	81057	21,592	29,552	39,748
Orthopaedics-MRP,NMajS	82025	30,956	42,664	57,384
Orthopaedic Surgery w/o Spine	86026	64,908	90,192	129,336
Orthopaedic Surgery w/Spine	80154	97,688	136,084	195,144
Otorhinolaryngology-NMRP,NS	80060	11,056	14,800	19,908
Otorhinolaryngology-MRP,NMajS	80291	30,956	42,664	57,384
Otorhinolaryngology; No Elective Plastic	80159	36,808	50,860	68,408
Otorhinolaryngology; Head/Neck	80155	41,492	57,416	80,096
Otorhinolaryngology; Other than Head/Neck	86155	62,564	86,916	124,636

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1A: COUNTY Vermilion

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	14,568	19,716	26,520
Pediatrics-NMRP	80267	14,568	19,716	26,520
Pediatrics-MRP	80293	30,956	42,664	57,384
Physical Med. & Rehab.	80235	11,056	14,800	19,908
Plastic Surgery	80156	62,564	86,916	124,636
Podiatry, No Surgery	86601	14,568	19,716	26,520
Podiatry, Surgery	86602	27,444	37,748	50,772
Psychiatry	80249	14,568	19,716	26,520
Public Health & Preventive Med	80236	11,056	14,800	19,908
Pulmonary Diseases	80269	27,444	37,748	50,772
Radiology-NMRP	80253	27,444	37,748	50,772
Radiology-MRP	80280	30,956	42,664	57,384
Radiology-MajRP	83033	39,152	54,136	72,812
Radiation Oncology	87047	19,248	26,272	35,336
Rheumatology	80252	15,736	21,356	28,724
Sleep Medicine	81086	25,104	34,468	46,360
Thoracic Surgery-NMRP, NS	81065	21,592	29,552	39,748
Thoracic Surgery	80144	83,636	116,416	166,940
Urological Surgery	80145	35,640	49,220	66,200
Urology-MRP, NMajS	82040	30,956	42,664	57,384
Vascular Surgery-MRP, NMajS	82050	30,956	42,664	57,384
Vascular Surgery	80146	83,636	116,416	166,940
Physician, Clinical Practice Not Insurable	80086	2,212	2,960	3,980
Retired, Not in Practice	80179	2,212	2,960	3,980
Physician, No Clinical Practice	80085	2,212	2,960	3,980
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1A: COUNTY Vermilion

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	11,056	14,800	19,908
Other, Specialty NOC	88002	14,568	19,716	26,520
Other, Specialty NOC	88003	15,736	21,356	28,724
Other, Specialty NOC	80268	21,592	29,552	39,748
Other, Specialty NOC	88005	25,104	34,468	46,360
Other, Specialty NOC	88006	23,932	32,828	44,152
Other, Specialty NOC	88007	27,444	37,748	50,772
Other, Specialty NOC	80294	30,956	42,664	57,384
Other, Specialty NOC	88009	26,272	36,108	48,564
Other, Specialty NOC	88010	35,640	49,220	66,200
Other, Specialty NOC	83041	39,152	54,136	72,812
Other, Specialty NOC	84042	41,492	57,416	80,096
Other, Specialty NOC	88013	46,176	63,972	89,240
Other, Specialty NOC	88014	62,564	86,916	124,636
Other, Specialty NOC	85043	64,908	90,192	129,336
Other, Specialty NOC	88016	83,636	116,416	166,940
Other, Specialty NOC	86044	90,660	126,252	181,044
Other, Specialty NOC	88018	97,688	136,084	195,144
Other, Specialty NOC	88019	33,296	45,940	61,788
Other, Specialty NOC	87045	149,196	208,200	306,888
Other, Specialty NOC	88021	19,248	26,272	35,336
Other, Specialty NOC	88022	36,808	50,860	68,408
Other, Specialty NOC	88023	64,908	90,192	125,816

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis	count	rate per procedure/encounter	
	code	/ FTE	\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	12.72
Anesthesiology	80151	800	N/A	45.14
Urgent Care	80239	6,000	N/A	4.93
Surgicenter	n/a	n/a	N/A	23.04

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1B: COUNTIES Kane, McHenry, Winnebago

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	10,536	14,072	18,928
Anesthesiology	80151	24,908	34,196	45,992
Anesthesiology-Pain Management	80182	24,908	34,196	45,992
Bariatrics	81076	20,484	28,004	37,664
Cardiac Surgery-MRP, NMajS	82042	29,332	40,388	54,320
Cardiac Surgery	80141	79,084	110,044	157,804
Cardiovascular Disease-NMRP, NS	80255	22,696	31,100	41,828
Cardiovascular Disease-Spec. MRP	82058	29,332	40,388	54,320
Cardiovascular Disease-MRP	80281	34,860	48,128	64,732
Colon Surgery	85004	37,068	51,224	68,896
Dermatology	80256	13,852	18,716	25,172
Dermatology-Tumescent Liposuction Only	81087	20,484	28,004	37,664
Diabetes	80237	20,484	28,004	37,664
Emergency Medicine-NMajS, prim	80102	34,860	48,128	64,732
Emergency Medicine-MajS	80157	39,280	54,320	75,776
Endocrinology	80238	13,852	18,716	25,172
Family Practice-NMRP, NS	80239	20,484	28,004	37,664
Family Practice-MRP, NMajS	80273	31,540	43,484	58,484
Family Practice-not primarily MajS	83009	43,704	60,508	84,408
Forensic Medicine	80240	10,536	14,072	18,928
Gastroenterology	80241	29,332	40,388	54,320
General Practice-NMRP, NS	80242	20,484	28,004	37,664
General Practice-MRP, NMajS	80275	31,540	43,484	58,484
General Practice-NMajS, prim.	80117	43,704	60,508	84,408
General Surgery-NMRP	84076	20,484	28,004	37,664
General Surgery-MRP, NMajS	82074	29,332	40,388	54,320
General Surgery	80143	61,396	85,276	118,960
Geriatrics	80243	14,956	20,264	27,256
Gynecology-NMRP, NS	81050	23,804	32,648	43,912
Gynecology/Obstetrics-MRP, NMaj	80277	37,068	51,224	68,896
Gynecological Surgery	86053	39,280	54,320	75,776
Hand Surgery-MRP, NMajS	82044	29,332	40,388	54,320
Hand Surgery	80169	39,280	54,320	75,776

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1B: COUNTIES Kane, McHenry, Winnebago

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	39,280	54,320	75,776
Hematology	80245	20,484	28,004	37,664
Hospitalist, Family Practice	81083	23,804	32,648	43,912
Hospitalist, Internal Medicine	81084	23,804	32,648	43,912
Hospitalist, Pediatrics	81085	23,804	32,648	43,912
Industrial Medicine	80233	20,484	28,004	37,664
Infectious Disease	80246	22,696	31,100	41,828
Internal Medicine-NMRP	80257	23,804	32,648	43,912
Internal Medicine-MRP	80284	29,332	40,388	54,320
Neonatology	83015	59,184	82,180	117,848
Nephrology-NMRP	80260	22,696	31,100	41,828
Nephrology-MRP	80287	26,012	35,744	48,076
Neurology	80261	29,332	40,388	54,320
Neurosurgery-NMRP,NMajS	81045	20,484	28,004	37,664
Neurosurgery-MRP,NMajS	82045	33,752	46,580	62,652
Neurosurgery-No Intracranial Surgery	86027	92,352	128,620	184,440
Neurosurgery	80152	141,004	196,728	289,976
Nuclear Medicine	80262	20,484	28,004	37,664
Obstetrical/Gynecological Surgery	80153	85,720	119,332	171,124
Occupational Medicine	80079	10,536	14,072	18,928
Oncology	80259	20,484	28,004	37,664
Ophthalmology-NS	80263	13,852	18,716	25,172
Ophthalmic Surgery	80114	20,484	28,004	37,664
Oral/Maxillofacial Surgery	86154	20,484	28,004	37,664
Orthopaedics-NMRP,NS	81057	20,484	28,004	37,664
Orthopaedics-MRP,NMajS	82025	29,332	40,388	54,320
Orthopaedic Surgery w/o Spine	86026	61,396	85,276	122,284
Orthopaedic Surgery w/Spine	80154	92,352	128,620	184,440
Otorhinolaryngology-NMRP,NS	80060	10,536	14,072	18,928
Otorhinolaryngology-MRP,NMajS	80291	29,332	40,388	54,320
Otorhinolaryngology; No Elective Plastic	80159	34,860	48,128	64,732
Otorhinolaryngology; Head/Neck	80155	39,280	54,320	75,776
Otorhinolaryngology; Other than Head/Neck	86155	59,184	82,180	117,848

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1B: COUNTIES Kane, McHenry, Winnebago

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	13,852	18,716	25,172
Pediatrics-NMRP	80267	13,852	18,716	25,172
Pediatrics-MRP	80293	29,332	40,388	54,320
Physical Med. & Rehab.	80235	10,536	14,072	18,928
Plastic Surgery	80156	59,184	82,180	117,848
Podiatry, No Surgery	86601	13,852	18,716	25,172
Podiatry, Surgery	86602	26,012	35,744	48,076
Psychiatry	80249	13,852	18,716	25,172
Public Health & Preventive Med	80236	10,536	14,072	18,928
Pulmonary Diseases	80269	26,012	35,744	48,076
Radiology-NMRP	80253	26,012	35,744	48,076
Radiology-MRP	80280	29,332	40,388	54,320
Radiology-MajRP	83033	37,068	51,224	68,896
Radiation Oncology	87047	18,272	24,908	33,500
Rheumatology	80252	14,956	20,264	27,256
Sleep Medicine	81086	23,804	32,648	43,912
Thoracic Surgery-NMRP, NS	81065	20,484	28,004	37,664
Thoracic Surgery	80144	79,084	110,044	157,804
Urological Surgery	80145	33,752	46,580	62,652
Urology-MRP, NMajS	82040	29,332	40,388	54,320
Vascular Surgery-MRP, NMajS	82050	29,332	40,388	54,320
Vascular Surgery	80146	79,084	110,044	157,804
Physician, Clinical Practice Not Insurable	80086	2,108	2,816	3,788
Retired, Not in Practice	80179	2,108	2,816	3,788
Physician, No Clinical Practice	80085	2,108	2,816	3,788
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1B: COUNTIES Kane, McHenry, Winnebago

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	10,536	14,072	18,928
Other, Specialty NOC	88002	13,852	18,716	25,172
Other, Specialty NOC	88003	14,956	20,264	27,256
Other, Specialty NOC	80268	20,484	28,004	37,664
Other, Specialty NOC	88005	23,804	32,648	43,912
Other, Specialty NOC	88006	22,696	31,100	41,828
Other, Specialty NOC	88007	26,012	35,744	48,076
Other, Specialty NOC	80294	29,332	40,388	54,320
Other, Specialty NOC	88009	24,908	34,196	45,992
Other, Specialty NOC	88010	33,752	46,580	62,652
Other, Specialty NOC	83041	37,068	51,224	68,896
Other, Specialty NOC	84042	39,280	54,320	75,776
Other, Specialty NOC	88013	43,704	60,508	84,408
Other, Specialty NOC	88014	59,184	82,180	117,848
Other, Specialty NOC	85043	61,396	85,276	122,284
Other, Specialty NOC	88016	79,084	110,044	157,804
Other, Specialty NOC	86044	85,720	119,332	171,124
Other, Specialty NOC	88018	92,352	128,620	184,440
Other, Specialty NOC	88019	31,540	43,484	58,484
Other, Specialty NOC	87045	141,004	196,728	289,976
Other, Specialty NOC	88021	18,272	24,908	33,500
Other, Specialty NOC	88022	34,860	48,128	64,732
Other, Specialty NOC	88023	61,396	85,276	118,960
For Non-Standard, Use:	88046			

FTE/Surgicenter Rates	basis	count		rate per procedure/encounter	
	code	/ FTE		\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	12.03	16.18
Anesthesiology	80151	800	N/A	42.75	57.49
Urgent Care	80239	6,000	N/A	4.67	6.28
Surgicenter	n/a	n/a	N/A	21.76	29.15

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1C: COUNTY Madison

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	12,616	16,988	22,848
Anesthesiology	80151	30,372	41,844	56,280
Anesthesiology-Pain Management	80182	30,372	41,844	56,280
Bariatrics	81076	24,908	34,196	45,992
Cardiac Surgery-MRP,NMajS	82042	35,836	49,492	66,568
Cardiac Surgery	80141	97,296	135,540	199,516
Cardiovascular Disease-NMRP, NS	80255	27,640	38,020	51,136
Cardiovascular Disease-Spec. MRP	82058	35,836	49,492	66,568
Cardiovascular Disease-MRP	80281	42,664	59,052	79,424
Colon Surgery	85004	45,396	62,876	84,568
Dermatology	80256	16,712	22,724	30,564
Dermatology-Tumescent Liposuction Only	81087	24,908	34,196	45,992
Diabetes	80237	24,908	34,196	45,992
Emergency Medicine-NMajS, prim	80102	42,664	59,052	79,424
Emergency Medicine-MajS	80157	48,128	66,700	93,048
Endocrinology	80238	16,712	22,724	30,564
Family Practice-NMRP, NS	80239	24,908	34,196	45,992
Family Practice-MRP, NMajS	80273	38,564	53,316	71,712
Family Practice-not primarily MajS	83009	53,588	74,352	103,720
Forensic Medicine	80240	12,616	16,988	22,848
Gastroenterology	80241	35,836	49,492	66,568
General Practice-NMRP, NS	80242	24,908	34,196	45,992
General Practice-MRP, NMajS	80275	38,564	53,316	71,712
General Practice-NMajS, prim.	80117	53,588	74,352	103,720
General Surgery-NMRP	84076	24,908	34,196	45,992
General Surgery-MRP, NMajS	82074	35,836	49,492	66,568
General Surgery	80143	75,444	104,944	146,396
Geriatrics	80243	18,080	24,636	33,136
Gynecology-NMRP, NS	81050	29,004	39,932	53,708
Gynecology/Obstetrics-MRP,NMaj	80277	45,396	62,876	84,568
Gynecological Surgery	86053	48,128	66,700	93,048
Hand Surgery-MRP, NMajS	82044	35,836	49,492	66,568
Hand Surgery	80169	48,128	66,700	93,048

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1C: COUNTY Madison

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	48,128	66,700	93,048
Hematology	80245	24,908	34,196	45,992
Hospitalist, Family Practice	81083	29,004	39,932	53,708
Hospitalist, Internal Medicine	81084	29,004	39,932	53,708
Hospitalist, Pediatrics	81085	29,004	39,932	53,708
Industrial Medicine	80233	24,908	34,196	45,992
Infectious Disease	80246	27,640	38,020	51,136
Internal Medicine-NMRP	80257	29,004	39,932	53,708
Internal Medicine-MRP	80284	35,836	49,492	66,568
Neonatology	83015	72,712	101,120	148,848
Nephrology-NMRP	80260	27,640	38,020	51,136
Nephrology-MRP	80287	31,736	43,756	58,852
Neurology	80261	35,836	49,492	66,568
Neurosurgery-NMRP,NMajS	81045	24,908	34,196	45,992
Neurosurgery-MRP,NMajS	82045	41,296	57,140	76,852
Neurosurgery-No Intracranial Surgery	86027	113,684	158,484	233,288
Neurosurgery	80152	173,780	242,620	367,568
Nuclear Medicine	80262	24,908	34,196	45,992
Obstetrical/Gynecological Surgery	80153	105,492	147,012	216,400
Occupational Medicine	80079	12,616	16,988	22,848
Oncology	80259	24,908	34,196	45,992
Ophthalmology-NS	80263	16,712	22,724	30,564
Ophthalmic Surgery	80114	24,908	34,196	45,992
Oral/Maxillofacial Surgery	86154	24,908	34,196	45,992
Orthopaedics-NMRP,NS	81057	24,908	34,196	45,992
Orthopaedics-MRP,NMajS	82025	35,836	49,492	66,568
Orthopaedic Surgery w/o Spine	86026	75,444	104,944	154,476
Orthopaedic Surgery w/Spine	80154	113,684	158,484	233,288
Otorhinolaryngology-NMRP,NS	80060	12,616	16,988	22,848
Otorhinolaryngology-MRP,NMajS	80291	35,836	49,492	66,568
Otorhinolaryngology; No Elective Plastic	80159	42,664	59,052	79,424
Otorhinolaryngology; Head/Neck	80155	48,128	66,700	93,048
Otorhinolaryngology; Other than Head/Neck	86155	72,712	101,120	148,848

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1C: COUNTY Madison

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	16,712	22,724	30,564
Pediatrics-NMRP	80267	16,712	22,724	30,564
Pediatrics-MRP	80293	35,836	49,492	66,568
Physical Med. & Rehab.	80235	12,616	16,988	22,848
Plastic Surgery	80156	72,712	101,120	148,848
Podiatry, No Surgery	86601	16,712	22,724	30,564
Podiatry, Surgery	86602	31,736	43,756	58,852
Psychiatry	80249	16,712	22,724	30,564
Public Health & Preventive Med	80236	12,616	16,988	22,848
Pulmonary Diseases	80269	31,736	43,756	58,852
Radiology-NMRP	80253	31,736	43,756	58,852
Radiology-MRP	80280	35,836	49,492	66,568
Radiology-MajRP	83033	45,396	62,876	84,568
Radiation Oncology	87047	22,176	30,372	40,852
Rheumatology	80252	18,080	24,636	33,136
Sleep Medicine	81086	29,004	39,932	53,708
Thoracic Surgery-NMRP, NS	81065	24,908	34,196	45,992
Thoracic Surgery	80144	97,296	135,540	199,516
Urological Surgery	80145	41,296	57,140	76,852
Urology-MRP, NMajS	82040	35,836	49,492	66,568
Vascular Surgery-MRP,NMajS	82050	35,836	49,492	66,568
Vascular Surgery	80146	97,296	135,540	199,516
Physician, Clinical Practice Not Insurable	80086	2,524	3,396	4,568
Retired, Not in Practice	80179	2,524	3,396	4,568
Physician, No Clinical Practice	80085	2,524	3,396	4,568
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 1C: COUNTY Madison

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	12,616	16,988	22,848
Other, Specialty NOC	88002	16,712	22,724	30,564
Other, Specialty NOC	88003	18,080	24,636	33,136
Other, Specialty NOC	80268	24,908	34,196	45,992
Other, Specialty NOC	88005	29,004	39,932	53,708
Other, Specialty NOC	88006	27,640	38,020	51,136
Other, Specialty NOC	88007	31,736	43,756	58,852
Other, Specialty NOC	80294	35,836	49,492	66,568
Other, Specialty NOC	88009	30,372	41,844	56,280
Other, Specialty NOC	88010	41,296	57,140	76,852
Other, Specialty NOC	83041	45,396	62,876	84,568
Other, Specialty NOC	84042	48,128	66,700	93,048
Other, Specialty NOC	88013	53,588	74,352	103,720
Other, Specialty NOC	88014	72,712	101,120	148,848
Other, Specialty NOC	85043	75,444	104,944	154,476
Other, Specialty NOC	88016	97,296	135,540	199,516
Other, Specialty NOC	86044	105,492	147,012	216,400
Other, Specialty NOC	88018	113,684	158,484	233,288
Other, Specialty NOC	88019	38,564	53,316	71,712
Other, Specialty NOC	87045	173,780	242,620	367,568
Other, Specialty NOC	88021	22,176	30,372	40,852
Other, Specialty NOC	88022	42,664	59,052	79,424
Other, Specialty NOC	88023	75,444	104,944	146,396
For Non-Standard, Use:	88046			

FTE/Surgicenter Rates	basis	count		rate per procedure/encounter	
	code	/ FTE		\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	14.76	19.86
Anesthesiology	80151	800	N/A	52.31	70.35
Urgent Care	80239	6,000	N/A	5.70	7.67
Surgicenter	n/a	n/a	N/A	26.88	36.01

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2: COUNTIES Kankakee and Lake

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	10,012	13,344	17,948
Anesthesiology	80151	23,540	32,284	43,420
Anesthesiology-Pain Management	80182	23,540	32,284	43,420
Bariatrics	81076	19,380	26,456	35,584
Cardiac Surgery-MRP,NMajS	82042	27,704	38,112	51,260
Cardiac Surgery	80141	74,532	103,668	148,660
Cardiovascular Disease-NMRP, NS	80255	21,460	29,368	39,500
Cardiovascular Disease-Spec. MRP	82058	27,704	38,112	51,260
Cardiovascular Disease-MRP	80281	32,908	45,396	61,056
Colon Surgery	85004	34,988	48,308	64,976
Dermatology	80256	13,136	17,716	23,828
Dermatology-Tumescent Liposuction Only	81087	19,380	26,456	35,584
Diabetes	80237	19,380	26,456	35,584
Emergency Medicine-NMajS, prim	80102	32,908	45,396	61,056
Emergency Medicine-MajS	80157	37,068	51,224	71,456
Endocrinology	80238	13,136	17,716	23,828
Family Practice-NMRP, NS	80239	19,380	26,456	35,584
Family Practice-MRP, NMajS	80273	29,784	41,024	55,176
Family Practice-not primarily MajS	83009	41,232	57,048	79,580
Forensic Medicine	80240	10,012	13,344	17,948
Gastroenterology	80241	27,704	38,112	51,260
General Practice-NMRP, NS	80242	19,380	26,456	35,584
General Practice-MRP, NMajS	80275	29,784	41,024	55,176
General Practice-NMajS, prim.	80117	41,232	57,048	79,580
General Surgery-NMRP	84076	19,380	26,456	35,584
General Surgery-MRP, NMajS	82074	27,704	38,112	51,260
General Surgery	80143	57,884	80,360	112,104
Geriatrics	80243	14,176	19,172	25,788
Gynecology-NMRP, NS	81050	22,500	30,828	41,464
Gynecology/Obstetrics-MRP,NMaj	80277	34,988	48,308	64,976
Gynecological Surgery	86053	37,068	51,224	71,456
Hand Surgery-MRP, NMajS	82044	27,704	38,112	51,260
Hand Surgery	80169	37,068	51,224	71,456

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2: COUNTIES Kankakee and Lake

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	37,068	51,224	71,456
Hematology	80245	19,380	26,456	35,584
Hospitalist, Family Practice	81083	22,500	30,828	41,464
Hospitalist, Internal Medicine	81084	22,500	30,828	41,464
Hospitalist, Pediatrics	81085	22,500	30,828	41,464
Industrial Medicine	80233	19,380	26,456	35,584
Infectious Disease	80246	21,460	29,368	39,500
Internal Medicine-NMRP	80257	22,500	30,828	41,464
Internal Medicine-MRP	80284	27,704	38,112	51,260
Neonatology	83015	55,800	77,448	111,060
Nephrology-NMRP	80260	21,460	29,368	39,500
Nephrology-MRP	80287	24,584	33,740	45,380
Neurology	80261	27,704	38,112	51,260
Neurosurgery-NMRP,NMajS	81045	19,380	26,456	35,584
Neurosurgery-MRP,NMajS	82045	31,868	43,940	59,100
Neurosurgery-No Intracranial Surgery	86027	87,020	121,152	173,732
Neurosurgery	80152	132,808	185,256	273,068
Nuclear Medicine	80262	19,380	26,456	35,584
Obstetrical/Gynecological Surgery	80153	80,776	112,412	161,200
Occupational Medicine	80079	10,012	13,344	17,948
Oncology	80259	19,380	26,456	35,584
Ophthalmology-NS	80263	13,136	17,716	23,828
Ophthalmic Surgery	80114	19,380	26,456	35,584
Oral/Maxillofacial Surgery	86154	19,380	26,456	35,584
Orthopaedics-NMRP,NS	81057	19,380	26,456	35,584
Orthopaedics-MRP,NMajS	82025	27,704	38,112	51,260
Orthopaedic Surgery w/o Spine	86026	57,884	80,360	115,236
Orthopaedic Surgery w/Spine	80154	87,020	121,152	173,732
Otorhinolaryngology-NMRP,NS	80060	10,012	13,344	17,948
Otorhinolaryngology-MRP,NMajS	80291	27,704	38,112	51,260
Otorhinolaryngology; No Elective Plastic	80159	32,908	45,396	61,056
Otorhinolaryngology; Head/Neck	80155	37,068	51,224	71,456
Otorhinolaryngology; Other than Head/Neck	86155	55,800	77,448	111,060

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2: COUNTIES Kankakee and Lake

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	13,136	17,716	23,828
Pediatrics-NMRP	80267	13,136	17,716	23,828
Pediatrics-MRP	80293	27,704	38,112	51,260
Physical Med. & Rehab.	80235	10,012	13,344	17,948
Plastic Surgery	80156	55,800	77,448	111,060
Podiatry, No Surgery	86601	13,136	17,716	23,828
Podiatry, Surgery	86602	24,584	33,740	45,380
Psychiatry	80249	13,136	17,716	23,828
Public Health & Preventive Med	80236	10,012	13,344	17,948
Pulmonary Diseases	80269	24,584	33,740	45,380
Radiology-NMRP	80253	24,584	33,740	45,380
Radiology-MRP	80280	27,704	38,112	51,260
Radiology-MajRP	83033	34,988	48,308	64,976
Radiation Oncology	87047	17,300	23,540	31,660
Rheumatology	80252	14,176	19,172	25,788
Sleep Medicine	81086	22,500	30,828	41,464
Thoracic Surgery-NMRP, NS	81065	19,380	26,456	35,584
Thoracic Surgery	80144	74,532	103,668	148,660
Urological Surgery	80145	31,868	43,940	59,100
Urology-MRP, NMajS	82040	27,704	38,112	51,260
Vascular Surgery-MRP,NMajS	82050	27,704	38,112	51,260
Vascular Surgery	80146	74,532	103,668	148,660
Physician, Clinical Practice Not Insurable	80086	2,004	2,668	3,588
Retired, Not in Practice	80179	2,004	2,668	3,588
Physician, No Clinical Practice	80085	2,004	2,668	3,588
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2: COUNTIES Kankakee and Lake

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	10,012	13,344	17,948
Other, Specialty NOC	88002	13,136	17,716	23,828
Other, Specialty NOC	88003	14,176	19,172	25,788
Other, Specialty NOC	80268	19,380	26,456	35,584
Other, Specialty NOC	88005	22,500	30,828	41,464
Other, Specialty NOC	88006	21,460	29,368	39,500
Other, Specialty NOC	88007	24,584	33,740	45,380
Other, Specialty NOC	80294	27,704	38,112	51,260
Other, Specialty NOC	88009	23,540	32,284	43,420
Other, Specialty NOC	88010	31,868	43,940	59,100
Other, Specialty NOC	83041	34,988	48,308	64,976
Other, Specialty NOC	84042	37,068	51,224	71,456
Other, Specialty NOC	88013	41,232	57,048	79,580
Other, Specialty NOC	88014	55,800	77,448	111,060
Other, Specialty NOC	85043	57,884	80,360	115,236
Other, Specialty NOC	88016	74,532	103,668	148,660
Other, Specialty NOC	86044	80,776	112,412	161,200
Other, Specialty NOC	88018	87,020	121,152	173,732
Other, Specialty NOC	88019	29,784	41,024	55,176
Other, Specialty NOC	87045	132,808	185,256	273,068
Other, Specialty NOC	88021	17,300	23,540	31,660
Other, Specialty NOC	88022	32,908	45,396	61,056
Other, Specialty NOC	88023	57,884	80,360	112,104

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis	count	rate per procedure/encounter		
	code	/ FTE	\$1M/\$3M	\$2M/\$4M	
Emergency Medicine	80102	4,000	N/A	11.35	15.26
Anesthesiology	80151	800	N/A	40.35	54.28
Urgent Care	80239	6,000	N/A	4.41	5.93
Surgicenter	n/a	n/a	N/A	20.48	27.43

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

**TERRITORY 2A: COUNTIES Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, Lasalle,
Macon, Ogle, Randolph**

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	8,972	11,888	15,988
Anesthesiology	80151	20,812	28,460	38,280
Anesthesiology-Pain Management	80182	20,812	28,460	38,280
Bariatrics	81076	17,168	23,360	31,420
Cardiac Surgery-MRP,NMajS	82042	24,452	33,556	45,132
Cardiac Surgery	80141	65,428	90,924	130,384
Cardiovascular Disease-NMRP, NS	80255	18,988	25,908	34,848
Cardiovascular Disease-Spec. MRP	82058	24,452	33,556	45,132
Cardiovascular Disease-MRP	80281	29,004	39,932	53,708
Colon Surgery	85004	30,828	42,480	57,136
Dermatology	80256	11,704	15,712	21,132
Dermatology-Tumescent Liposuction Only	81087	17,168	23,360	31,420
Diabetes	80237	17,168	23,360	31,420
Emergency Medicine-NMajS, prim	80102	29,004	39,932	53,708
Emergency Medicine-MajS	80157	32,648	45,032	62,820
Endocrinology	80238	11,704	15,712	21,132
Family Practice-NMRP, NS	80239	17,168	23,360	31,420
Family Practice-MRP, NMajS	80273	26,272	36,108	48,564
Family Practice-not primarily MajS	83009	36,288	50,128	69,928
Forensic Medicine	80240	8,972	11,888	15,988
Gastroenterology	80241	24,452	33,556	45,132
General Practice-NMRP, NS	80242	17,168	23,360	31,420
General Practice-MRP, NMajS	80275	26,272	36,108	48,564
General Practice-NMajS, prim.	80117	36,288	50,128	69,928
General Surgery-NMRP	84076	17,168	23,360	31,420
General Surgery-MRP, NMajS	82074	24,452	33,556	45,132
General Surgery	80143	50,860	70,524	98,380
Geriatrics	80243	12,616	16,988	22,848
Gynecology-NMRP, NS	81050	19,900	27,184	36,564
Gynecology/Obstetrics-MRP,NMaj	80277	30,828	42,480	57,136
Gynecological Surgery	86053	32,648	45,032	62,820
Hand Surgery-MRP, NMajS	82044	24,452	33,556	45,132
Hand Surgery	80169	32,648	45,032	62,820

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2A: COUNTIES Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, Lasalle,

Macon, Ogle, Randolph

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	32,648	45,032	62,820
Hematology	80245	17,168	23,360	31,420
Hospitalist, Family Practice	81083	19,900	27,184	36,564
Hospitalist, Internal Medicine	81084	19,900	27,184	36,564
Hospitalist, Pediatrics	81085	19,900	27,184	36,564
Industrial Medicine	80233	17,168	23,360	31,420
Infectious Disease	80246	18,988	25,908	34,848
Internal Medicine-NMRP	80257	19,900	27,184	36,564
Internal Medicine-MRP	80284	24,452	33,556	45,132
Neonatology	83015	49,036	67,976	97,476
Nephrology-NMRP	80260	18,988	25,908	34,848
Nephrology-MRP	80287	21,720	29,732	39,988
Neurology	80261	24,452	33,556	45,132
Neurosurgery-NMRP,NMajS	81045	17,168	23,360	31,420
Neurosurgery-MRP,NMajS	82045	28,096	38,656	51,992
Neurosurgery-No Intracranial Surgery	86027	76,352	106,220	152,320
Neurosurgery	80152	116,416	162,308	239,240
Nuclear Medicine	80262	17,168	23,360	31,420
Obstetrical/Gynecological Surgery	80153	70,892	98,572	141,352
Occupational Medicine	80079	8,972	11,888	15,988
Oncology	80259	17,168	23,360	31,420
Ophthalmology-NS	80263	11,704	15,712	21,132
Ophthalmic Surgery	80114	17,168	23,360	31,420
Oral/Maxillofacial Surgery	86154	17,168	23,360	31,420
Orthopaedics-NMRP,NS	81057	17,168	23,360	31,420
Orthopaedics-MRP,NMajS	82025	24,452	33,556	45,132
Orthopaedic Surgery w/o Spine	86026	50,860	70,524	101,132
Orthopaedic Surgery w/Spine	80154	76,352	106,220	152,320
Otorhinolaryngology-NMRP,NS	80060	8,972	11,888	15,988
Otorhinolaryngology-MRP,NMajS	80291	24,452	33,556	45,132
Otorhinolaryngology; No Elective Plastic	80159	29,004	39,932	53,708
Otorhinolaryngology; Head/Neck	80155	32,648	45,032	62,820
Otorhinolaryngology; Other than Head/Neck	86155	49,036	67,976	97,476

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2A: COUNTIES Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, Lasalle, Macon, Ogle, Randolph

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	11,704	15,712	21,132
Pediatrics-NMRP	80267	11,704	15,712	21,132
Pediatrics-MRP	80293	24,452	33,556	45,132
Physical Med. & Rehab.	80235	8,972	11,888	15,988
Plastic Surgery	80156	49,036	67,976	97,476
Podiatry, No Surgery	86601	11,704	15,712	21,132
Podiatry, Surgery	86602	21,720	29,732	39,988
Psychiatry	80249	11,704	15,712	21,132
Public Health & Preventive Med	80236	8,972	11,888	15,988
Pulmonary Diseases	80269	21,720	29,732	39,988
Radiology-NMRP	80253	21,720	29,732	39,988
Radiology-MRP	80280	24,452	33,556	45,132
Radiology-MajRP	83033	30,828	42,480	57,136
Radiation Oncology	87047	15,348	20,812	27,992
Rheumatology	80252	12,616	16,988	22,848
Sleep Medicine	81086	19,900	27,184	36,564
Thoracic Surgery-NMRP, NS	81065	17,168	23,360	31,420
Thoracic Surgery	80144	65,428	90,924	130,384
Urological Surgery	80145	28,096	38,656	51,992
Urology-MRP, NMajS	82040	24,452	33,556	45,132
Vascular Surgery-MRP, NMajS	82050	24,452	33,556	45,132
Vascular Surgery	80146	65,428	90,924	130,384
Physician, Clinical Practice Not Insurable	80086	1,796	2,376	3,196
Retired, Not in Practice	80179	1,796	2,376	3,196
Physician, No Clinical Practice	80085	1,796	2,376	3,196
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2A: COUNTIES Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, Lasalle, Macon, Ogle, Randolph

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	8,972	11,888	15,988
Other, Specialty NOC	88002	11,704	15,712	21,132
Other, Specialty NOC	88003	12,616	16,988	22,848
Other, Specialty NOC	80268	17,168	23,360	31,420
Other, Specialty NOC	88005	19,900	27,184	36,564
Other, Specialty NOC	88006	18,988	25,908	34,848
Other, Specialty NOC	88007	21,720	29,732	39,988
Other, Specialty NOC	80294	24,452	33,556	45,132
Other, Specialty NOC	88009	20,812	28,460	38,280
Other, Specialty NOC	88010	28,096	38,656	51,992
Other, Specialty NOC	83041	30,828	42,480	57,136
Other, Specialty NOC	84042	32,648	45,032	62,820
Other, Specialty NOC	88013	36,288	50,128	69,928
Other, Specialty NOC	88014	49,036	67,976	97,476
Other, Specialty NOC	85043	50,860	70,524	101,132
Other, Specialty NOC	88016	65,428	90,924	130,384
Other, Specialty NOC	86044	70,892	98,572	141,352
Other, Specialty NOC	88018	76,352	106,220	152,320
Other, Specialty NOC	88019	26,272	36,108	48,564
Other, Specialty NOC	87045	116,416	162,308	239,240
Other, Specialty NOC	88021	15,348	20,812	27,992
Other, Specialty NOC	88022	29,004	39,932	53,708
Other, Specialty NOC	88023	50,860	70,524	98,380
For Non-Standard, Use:	88046			
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FTE/Surgicenter Rates	basis code	count / FTE	rate per procedure/encounter	
			\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	13.43
Anesthesiology	80151	800	N/A	47.85
Urgent Care	80239	6,000	N/A	5.24
Surgicenter	n/a	n/a	N/A	24.01

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2B: COUNTY Grundy

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	8,452	11,160	15,012
Anesthesiology	80151	19,444	26,548	35,708
Anesthesiology-Pain Management	80182	19,444	26,548	35,708
Bariatrics	81076	16,064	21,812	29,336
Cardiac Surgery-MRP,NMajS	82042	22,828	31,280	42,072
Cardiac Surgery	80141	60,876	84,548	121,240
Cardiovascular Disease-NMRP, NS	80255	17,752	24,180	32,524
Cardiovascular Disease-Spec. MRP	82058	22,828	31,280	42,072
Cardiovascular Disease-MRP	80281	27,056	37,200	50,032
Colon Surgery	85004	28,744	39,568	53,220
Dermatology	80256	10,988	14,708	19,784
Dermatology-Tumescent Liposuction Only	81087	16,064	21,812	29,336
Diabetes	80237	16,064	21,812	29,336
Emergency Medicine-NMajS, prim	80102	27,056	37,200	50,032
Emergency Medicine-MajS	80157	30,436	41,936	58,500
Endocrinology	80238	10,988	14,708	19,784
Family Practice-NMRP, NS	80239	16,064	21,812	29,336
Family Practice-MRP, NMajS	80273	24,516	33,648	45,256
Family Practice-not primarily MajS	83009	33,820	46,668	65,100
Forensic Medicine	80240	8,452	11,160	15,012
Gastroenterology	80241	22,828	31,280	42,072
General Practice-NMRP, NS	80242	16,064	21,812	29,336
General Practice-MRP, NMajS	80275	24,516	33,648	45,256
General Practice-NMajS, prim.	80117	33,820	46,668	65,100
General Surgery-NMRP	84076	16,064	21,812	29,336
General Surgery-MRP, NMajS	82074	22,828	31,280	42,072
General Surgery	80143	47,348	65,608	91,524
Geriatrics	80243	11,836	15,892	21,376
Gynecology-NMRP, NS	81050	18,600	25,364	34,116
Gynecology/Obstetrics-MRP,NMaj	80277	28,744	39,568	53,220
Gynecological Surgery	86053	30,436	41,936	58,500
Hand Surgery-MRP, NMajS	82044	22,828	31,280	42,072
Hand Surgery	80169	30,436	41,936	58,500

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2B: COUNTY Grundy

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	30,436	41,936	58,500
Hematology	80245	16,064	21,812	29,336
Hospitalist, Family Practice	81083	18,600	25,364	34,116
Hospitalist, Internal Medicine	81084	18,600	25,364	34,116
Hospitalist, Pediatrics	81085	18,600	25,364	34,116
Industrial Medicine	80233	16,064	21,812	29,336
Infectious Disease	80246	17,752	24,180	32,524
Internal Medicine-NMRP	80257	18,600	25,364	34,116
Internal Medicine-MRP	80284	22,828	31,280	42,072
Neonatology	83015	45,656	63,240	90,688
Nephrology-NMRP	80260	17,752	24,180	32,524
Nephrology-MRP	80287	20,288	27,732	37,300
Neurology	80261	22,828	31,280	42,072
Neurosurgery-NMRP,NMajS	81045	16,064	21,812	29,336
Neurosurgery-MRP,NMajS	82045	26,208	36,016	48,440
Neurosurgery-No Intracranial Surgery	86027	71,020	98,752	141,612
Neurosurgery	80152	108,224	150,836	222,332
Nuclear Medicine	80262	16,064	21,812	29,336
Obstetrical/Gynecological Surgery	80153	65,948	91,652	131,428
Occupational Medicine	80079	8,452	11,160	15,012
Oncology	80259	16,064	21,812	29,336
Ophthalmology-NS	80263	10,988	14,708	19,784
Ophthalmic Surgery	80114	16,064	21,812	29,336
Oral/Maxillofacial Surgery	86154	16,064	21,812	29,336
Orthopaedics-NMRP,NS	81057	16,064	21,812	29,336
Orthopaedics-MRP,NMajS	82025	22,828	31,280	42,072
Orthopaedic Surgery w/o Spine	86026	47,348	65,608	94,080
Orthopaedic Surgery w/Spine	80154	71,020	98,752	141,612
Otorhinolaryngology-NMRP,NS	80060	8,452	11,160	15,012
Otorhinolaryngology-MRP,NMajS	80291	22,828	31,280	42,072
Otorhinolaryngology; No Elective Plastic	80159	27,056	37,200	50,032
Otorhinolaryngology; Head/Neck	80155	30,436	41,936	58,500
Otorhinolaryngology; Other than Head/Neck	86155	45,656	63,240	90,688

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2B: COUNTY Grundy

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	10,988	14,708	19,784
Pediatrics-NMRP	80267	10,988	14,708	19,784
Pediatrics-MRP	80293	22,828	31,280	42,072
Physical Med. & Rehab.	80235	8,452	11,160	15,012
Plastic Surgery	80156	45,656	63,240	90,688
Podiatry, No Surgery	86601	10,988	14,708	19,784
Podiatry, Surgery	86602	20,288	27,732	37,300
Psychiatry	80249	10,988	14,708	19,784
Public Health & Preventive Med	80236	8,452	11,160	15,012
Pulmonary Diseases	80269	20,288	27,732	37,300
Radiology-NMRP	80253	20,288	27,732	37,300
Radiology-MRP	80280	22,828	31,280	42,072
Radiology-MajRP	83033	28,744	39,568	53,220
Radiation Oncology	87047	14,372	19,444	26,152
Rheumatology	80252	11,836	15,892	21,376
Sleep Medicine	81086	18,600	25,364	34,116
Thoracic Surgery-NMRP, NS	81065	16,064	21,812	29,336
Thoracic Surgery	80144	60,876	84,548	121,240
Urological Surgery	80145	26,208	36,016	48,440
Urology-MRP, NMajS	82040	22,828	31,280	42,072
Vascular Surgery-MRP,NMajS	82050	22,828	31,280	42,072
Vascular Surgery	80146	60,876	84,548	121,240
Physician, Clinical Practice Not Insurable	80086	1,692	2,232	3,004
Retired, Not in Practice	80179	1,692	2,232	3,004
Physician, No Clinical Practice	80085	1,692	2,232	3,004
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2B: COUNTY Grundy

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	8,452	11,160	15,012
Other, Specialty NOC	88002	10,988	14,708	19,784
Other, Specialty NOC	88003	11,836	15,892	21,376
Other, Specialty NOC	80268	16,064	21,812	29,336
Other, Specialty NOC	88005	18,600	25,364	34,116
Other, Specialty NOC	88006	17,752	24,180	32,524
Other, Specialty NOC	88007	20,288	27,732	37,300
Other, Specialty NOC	80294	22,828	31,280	42,072
Other, Specialty NOC	88009	19,444	26,548	35,708
Other, Specialty NOC	88010	26,208	36,016	48,440
Other, Specialty NOC	83041	28,744	39,568	53,220
Other, Specialty NOC	84042	30,436	41,936	58,500
Other, Specialty NOC	88013	33,820	46,668	65,100
Other, Specialty NOC	88014	45,656	63,240	90,688
Other, Specialty NOC	85043	47,348	65,608	94,080
Other, Specialty NOC	88016	60,876	84,548	121,240
Other, Specialty NOC	86044	65,948	91,652	131,428
Other, Specialty NOC	88018	71,020	98,752	141,612
Other, Specialty NOC	88019	24,516	33,648	45,256
Other, Specialty NOC	87045	108,224	150,836	222,332
Other, Specialty NOC	88021	14,372	19,444	26,152
Other, Specialty NOC	88022	27,056	37,200	50,032
Other, Specialty NOC	88023	47,348	65,608	91,524
For Non-Standard, Use:	88046			

FTE/Surgicenter Rates	basis	count	rate per procedure/encounter	
	code	/ FTE	\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	12.51
Anesthesiology	80151	800	N/A	44.64
Urgent Care	80239	6,000	N/A	4.89
Surgicenter	n/a	n/a	N/A	22.29

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2C: COUNTIES Adams, Knox, Peoria, Rock Island

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Allergy/Immunology	80254	6,372	8,244	11,088
Anesthesiology	80151	13,980	18,900	25,420
Anesthesiology-Pain Management	80182	13,980	18,900	25,420
Bariatrics	81076	11,640	15,620	21,008
Cardiac Surgery-MRP,NMajS	82042	16,324	22,176	29,828
Cardiac Surgery	80141	42,664	59,052	84,680
Cardiovascular Disease-NMRP, NS	80255	12,812	17,260	23,216
Cardiovascular Disease-Spec. MRP	82058	16,324	22,176	29,828
Cardiovascular Disease-MRP	80281	19,248	26,272	35,336
Colon Surgery	85004	20,420	27,912	37,540
Dermatology	80256	8,128	10,704	14,396
Dermatology-Tumescent Liposuction Only	81087	11,640	15,620	21,008
Diabetes	80237	11,640	15,620	21,008
Emergency Medicine-NMajS, prim	80102	19,248	26,272	35,336
Emergency Medicine-MajS	80157	21,592	29,552	41,224
Endocrinology	80238	8,128	10,704	14,396
Family Practice-NMRP, NS	80239	11,640	15,620	21,008
Family Practice-MRP, NMajS	80273	17,492	23,816	32,032
Family Practice-not primarily MajS	83009	23,932	32,828	45,796
Forensic Medicine	80240	6,372	8,244	11,088
Gastroenterology	80241	16,324	22,176	29,828
General Practice-NMRP, NS	80242	11,640	15,620	21,008
General Practice-MRP, NMajS	80275	17,492	23,816	32,032
General Practice-NMajS, prim.	80117	23,932	32,828	45,796
General Surgery-NMRP	84076	11,640	15,620	21,008
General Surgery-MRP, NMajS	82074	16,324	22,176	29,828
General Surgery	80143	33,296	45,940	64,088
Geriatrics	80243	8,712	11,524	15,500
Gynecology-NMRP, NS	81050	13,396	18,080	24,316
Gynecology/Obstetrics-MRP,NMaj	80277	20,420	27,912	37,540
Gynecological Surgery	86053	21,592	29,552	41,224
Hand Surgery-MRP, NMajS	82044	16,324	22,176	29,828
Hand Surgery	80169	21,592	29,552	41,224

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2C: COUNTIES Adams, Knox, Peoria, Rock Island

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Head/Neck Surgery	80170	21,592	29,552	41,224
Hematology	80245	11,640	15,620	21,008
Hospitalist, Family Practice	81083	13,396	18,080	24,316
Hospitalist, Internal Medicine	81084	13,396	18,080	24,316
Hospitalist, Pediatrics	81085	13,396	18,080	24,316
Industrial Medicine	80233	11,640	15,620	21,008
Infectious Disease	80246	12,812	17,260	23,216
Internal Medicine-NMRP	80257	13,396	18,080	24,316
Internal Medicine-MRP	80284	16,324	22,176	29,828
Neonatology	83015	32,128	44,304	63,532
Nephrology-NMRP	80260	12,812	17,260	23,216
Nephrology-MRP	80287	14,568	19,716	26,520
Neurology	80261	16,324	22,176	29,828
Neurosurgery-NMRP,NMajS	81045	11,640	15,620	21,008
Neurosurgery-MRP,NMajS	82045	18,664	25,456	34,240
Neurosurgery-No Intracranial Surgery	86027	49,688	68,888	98,784
Neurosurgery	80152	75,444	104,944	154,688
Nuclear Medicine	80262	11,640	15,620	21,008
Obstetrical/Gynecological Surgery	80153	46,176	63,972	91,736
Occupational Medicine	80079	6,372	8,244	11,088
Oncology	80259	11,640	15,620	21,008
Ophthalmology-NS	80263	8,128	10,704	14,396
Ophthalmic Surgery	80114	11,640	15,620	21,008
Oral/Maxillofacial Surgery	86154	11,640	15,620	21,008
Orthopaedics-NMRP,NS	81057	11,640	15,620	21,008
Orthopaedics-MRP,NMajS	82025	16,324	22,176	29,828
Orthopaedic Surgery w/o Spine	86026	33,296	45,940	65,876
Orthopaedic Surgery w/Spine	80154	49,688	68,888	98,784
Otorhinolaryngology-NMRP,NS	80060	6,372	8,244	11,088
Otorhinolaryngology-MRP,NMajS	80291	16,324	22,176	29,828
Otorhinolaryngology; No Elective Plastic	80159	19,248	26,272	35,336
Otorhinolaryngology; Head/Neck	80155	21,592	29,552	41,224
Otorhinolaryngology; Other than Head/Neck	86155	32,128	44,304	63,532

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2C: COUNTIES Adams, Knox, Peoria, Rock Island

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Pathology	80082	8,128	10,704	14,396
Pediatrics-NMRP	80267	8,128	10,704	14,396
Pediatrics-MRP	80293	16,324	22,176	29,828
Physical Med. & Rehab.	80235	6,372	8,244	11,088
Plastic Surgery	80156	32,128	44,304	63,532
Podiatry, No Surgery	86601	8,128	10,704	14,396
Podiatry, Surgery	86602	14,568	19,716	26,520
Psychiatry	80249	8,128	10,704	14,396
Public Health & Preventive Med	80236	6,372	8,244	11,088
Pulmonary Diseases	80269	14,568	19,716	26,520
Radiology-NMRP	80253	14,568	19,716	26,520
Radiology-MRP	80280	16,324	22,176	29,828
Radiology-MajRP	83033	20,420	27,912	37,540
Radiation Oncology	87047	10,468	13,980	18,804
Rheumatology	80252	8,712	11,524	15,500
Sleep Medicine	81086	13,396	18,080	24,316
Thoracic Surgery-NMRP, NS	81065	11,640	15,620	21,008
Thoracic Surgery	80144	42,664	59,052	84,680
Urological Surgery	80145	18,664	25,456	34,240
Urology-MRP, NMajS	82040	16,324	22,176	29,828
Vascular Surgery-MRP, NMajS	82050	16,324	22,176	29,828
Vascular Surgery	80146	42,664	59,052	84,680
Physician, Clinical Practice Not Insurable	80086	1,276	1,648	2,216
Retired, Not in Practice	80179	1,276	1,648	2,216
Physician, No Clinical Practice	80085	1,276	1,648	2,216
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2C: COUNTIES Adams, Knox, Peoria, Rock Island

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>\$500K/\$1.5M</u>	<u>\$1M/\$3M</u>	<u>\$2M/\$4M</u>
Other, Specialty NOC	80084	6,372	8,244	11,088
Other, Specialty NOC	88002	8,128	10,704	14,396
Other, Specialty NOC	88003	8,712	11,524	15,500
Other, Specialty NOC	80268	11,640	15,620	21,008
Other, Specialty NOC	88005	13,396	18,080	24,316
Other, Specialty NOC	88006	12,812	17,260	23,216
Other, Specialty NOC	88007	14,568	19,716	26,520
Other, Specialty NOC	80294	16,324	22,176	29,828
Other, Specialty NOC	88009	13,980	18,900	25,420
Other, Specialty NOC	88010	18,664	25,456	34,240
Other, Specialty NOC	83041	20,420	27,912	37,540
Other, Specialty NOC	84042	21,592	29,552	41,224
Other, Specialty NOC	88013	23,932	32,828	45,796
Other, Specialty NOC	88014	32,128	44,304	63,532
Other, Specialty NOC	85043	33,296	45,940	65,876
Other, Specialty NOC	88016	42,664	59,052	84,680
Other, Specialty NOC	86044	46,176	63,972	91,736
Other, Specialty NOC	88018	49,688	68,888	98,784
Other, Specialty NOC	88019	17,492	23,816	32,032
Other, Specialty NOC	87045	75,444	104,944	154,688
Other, Specialty NOC	88021	10,468	13,980	18,804
Other, Specialty NOC	88022	19,248	26,272	35,336
Other, Specialty NOC	88023	33,296	45,940	64,088

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis	count		rate per procedure/encounter	
	code	/ FTE		\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	6.57	8.83
Anesthesiology	80151	800	N/A	23.63	31.78
Urgent Care	80239	6,000	N/A	2.60	3.50
Surgicenter	n/a	n/a	N/A	11.52	15.43

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2D: COUNTY Sangamon

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Allergy/Immunology	80254	7,412	9,700	13,048
Anesthesiology	80151	16,712	22,724	30,564
Anesthesiology-Pain Management	80182	16,712	22,724	30,564
Bariatrics	81076	13,852	18,716	25,172
Cardiac Surgery-MRP,NMajS	82042	19,576	26,728	35,948
Cardiac Surgery	80141	51,768	71,800	102,960
Cardiovascular Disease-NMRP, NS	80255	15,280	20,720	27,868
Cardiovascular Disease-Spec. MRP	82058	19,576	26,728	35,948
Cardiovascular Disease-MRP	80281	23,152	31,736	42,684
Colon Surgery	85004	24,584	33,740	45,380
Dermatology	80256	9,560	12,708	17,092
Dermatology-Tumescent Liposuction Only	81087	13,852	18,716	25,172
Diabetes	80237	13,852	18,716	25,172
Emergency Medicine-NMajS, prim	80102	23,152	31,736	42,684
Emergency Medicine-MajS	80157	26,012	35,744	49,864
Endocrinology	80238	9,560	12,708	17,092
Family Practice-NMRP, NS	80239	13,852	18,716	25,172
Family Practice-MRP, NMajS	80273	21,004	28,732	38,644
Family Practice-not primarily MajS	83009	28,876	39,748	55,448
Forensic Medicine	80240	7,412	9,700	13,048
Gastroenterology	80241	19,576	26,728	35,948
General Practice-NMRP, NS	80242	13,852	18,716	25,172
General Practice-MRP, NMajS	80275	21,004	28,732	38,644
General Practice-NMajS, prim.	80117	28,876	39,748	55,448
General Surgery-NMRP	84076	13,852	18,716	25,172
General Surgery-MRP, NMajS	82074	19,576	26,728	35,948
General Surgery	80143	40,320	55,776	77,808
Geriatrics	80243	10,272	13,708	18,436
Gynecology-NMRP, NS	81050	15,996	21,720	29,212
Gynecology/Obstetrics-MRP,NMaj	80277	24,584	33,740	45,380
Gynecological Surgery	86053	26,012	35,744	49,864
Hand Surgery-MRP, NMajS	82044	19,576	26,728	35,948
Hand Surgery	80169	26,012	35,744	49,864

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2D: COUNTY Sangamon

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Head/Neck Surgery	80170	26,012	35,744	49,864
Hematology	80245	13,852	18,716	25,172
Hospitalist, Family Practice	81083	15,996	21,720	29,212
Hospitalist, Internal Medicine	81084	15,996	21,720	29,212
Hospitalist, Pediatrics	81085	15,996	21,720	29,212
Industrial Medicine	80233	13,852	18,716	25,172
Infectious Disease	80246	15,280	20,720	27,868
Internal Medicine-NMRP	80257	15,996	21,720	29,212
Internal Medicine-MRP	80284	19,576	26,728	35,948
Neonatology	83015	38,892	53,772	77,108
Nephrology-NMRP	80260	15,280	20,720	27,868
Nephrology-MRP	80287	17,428	23,724	31,908
Neurology	80261	19,576	26,728	35,948
Neurosurgery-NMRP,NMajS	81045	13,852	18,716	25,172
Neurosurgery-MRP,NMajS	82045	22,436	30,736	41,340
Neurosurgery-No Intracranial Surgery	86027	60,352	83,820	120,196
Neurosurgery	80152	91,832	127,892	188,512
Nuclear Medicine	80262	13,852	18,716	25,172
Obstetrical/Gynecological Surgery	80153	56,060	77,812	111,584
Occupational Medicine	80079	7,412	9,700	13,048
Oncology	80259	13,852	18,716	25,172
Ophthalmology-NS	80263	9,560	12,708	17,092
Ophthalmic Surgery	80114	13,852	18,716	25,172
Oral/Maxillofacial Surgery	86154	13,852	18,716	25,172
Orthopaedics-NMRP,NS	81057	13,852	18,716	25,172
Orthopaedics-MRP,NMajS	82025	19,576	26,728	35,948
Orthopaedic Surgery w/o Spine	86026	40,320	55,776	79,984
Orthopaedic Surgery w/Spine	80154	60,352	83,820	120,196
Otorhinolaryngology-NMRP,NS	80060	7,412	9,700	13,048
Otorhinolaryngology-MRP,NMajS	80291	19,576	26,728	35,948
Otorhinolaryngology; No Elective Plastic	80159	23,152	31,736	42,684
Otorhinolaryngology; Head/Neck	80155	26,012	35,744	49,864
Otorhinolaryngology; Other than Head/Neck	86155	38,892	53,772	77,108

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ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2D: COUNTY Sangamon

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Pathology	80082	9,560	12,708	17,092
Pediatrics-NMRP	80267	9,560	12,708	17,092
Pediatrics-MRP	80293	19,576	26,728	35,948
Physical Med. & Rehab.	80235	7,412	9,700	13,048
Plastic Surgery	80156	38,892	53,772	77,108
Podiatry, No Surgery	86601	9,560	12,708	17,092
Podiatry, Surgery	86602	17,428	23,724	31,908
Psychiatry	80249	9,560	12,708	17,092
Public Health & Preventive Med	80236	7,412	9,700	13,048
Pulmonary Diseases	80269	17,428	23,724	31,908
Radiology-NMRP	80253	17,428	23,724	31,908
Radiology-MRP	80280	19,576	26,728	35,948
Radiology-MajRP	83033	24,584	33,740	45,380
Radiation Oncology	87047	12,420	16,712	22,476
Rheumatology	80252	10,272	13,708	18,436
Sleep Medicine	81086	15,996	21,720	29,212
Thoracic Surgery-NMRP, NS	81065	13,852	18,716	25,172
Thoracic Surgery	80144	51,768	71,800	102,960
Urological Surgery	80145	22,436	30,736	41,340
Urology-MRP, NMajS	82040	19,576	26,728	35,948
Vascular Surgery-MRP, NMajS	82050	19,576	26,728	35,948
Vascular Surgery	80146	51,768	71,800	102,960
Physician, Clinical Practice Not Insurable	80086	1,484	1,940	2,608
Retired, Not in Practice	80179	1,484	1,940	2,608
Physician, No Clinical Practice	80085	1,484	1,940	2,608
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 2D: COUNTY Sangamon

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Other, Specialty NOC	80084	7,412	9,700	13,048
Other, Specialty NOC	88002	9,560	12,708	17,092
Other, Specialty NOC	88003	10,272	13,708	18,436
Other, Specialty NOC	80268	13,852	18,716	25,172
Other, Specialty NOC	88005	15,996	21,720	29,212
Other, Specialty NOC	88006	15,280	20,720	27,868
Other, Specialty NOC	88007	17,428	23,724	31,908
Other, Specialty NOC	80294	19,576	26,728	35,948
Other, Specialty NOC	88009	16,712	22,724	30,564
Other, Specialty NOC	88010	22,436	30,736	41,340
Other, Specialty NOC	83041	24,584	33,740	45,380
Other, Specialty NOC	84042	26,012	35,744	49,864
Other, Specialty NOC	88013	28,876	39,748	55,448
Other, Specialty NOC	88014	38,892	53,772	77,108
Other, Specialty NOC	85043	40,320	55,776	79,984
Other, Specialty NOC	88016	51,768	71,800	102,960
Other, Specialty NOC	86044	56,060	77,812	111,584
Other, Specialty NOC	88018	60,352	83,820	120,196
Other, Specialty NOC	88019	21,004	28,732	38,644
Other, Specialty NOC	87045	91,832	127,892	188,512
Other, Specialty NOC	88021	12,420	16,712	22,476
Other, Specialty NOC	88022	23,152	31,736	42,684
Other, Specialty NOC	88023	40,320	55,776	77,808

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis code	count / FTE		rate per procedure/encounter \$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	7.93	10.67
Anesthesiology	80151	800	N/A	28.41	38.21
Urgent Care	80239	6,000	N/A	3.12	4.20
Surgicenter	n/a	n/a	N/A	14.08	18.86

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 3: REMAINDER OF STATE

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Allergy/Immunology	80254	6,892	8,972	12,068
Anesthesiology	80151	15,348	20,812	27,992
Anesthesiology-Pain Management	80182	15,348	20,812	27,992
Bariatrics	81076	12,744	17,168	23,092
Cardiac Surgery-MRP,NMajS	82042	17,948	24,452	32,888
Cardiac Surgery	80141	47,216	65,428	93,824
Cardiovascular Disease-NMRP, NS	80255	14,048	18,988	25,540
Cardiovascular Disease-Spec. MRP	82058	17,948	24,452	32,888
Cardiovascular Disease-MRP	80281	21,200	29,004	39,012
Colon Surgery	85004	22,500	30,828	41,464
Dermatology	80256	8,844	11,704	15,740
Dermatology-Tumescent Liposuction Only	81087	12,744	17,168	23,092
Diabetes	80237	12,744	17,168	23,092
Emergency Medicine-NMajS, prim	80102	21,200	29,004	39,012
Emergency Medicine-MajS	80157	23,804	32,648	45,544
Endocrinology	80238	8,844	11,704	15,740
Family Practice-NMRP, NS	80239	12,744	17,168	23,092
Family Practice-MRP, NMajS	80273	19,248	26,272	35,336
Family Practice-not primarily MajS	83009	26,404	36,288	50,620
Forensic Medicine	80240	6,892	8,972	12,068
Gastroenterology	80241	17,948	24,452	32,888
General Practice-NMRP, NS	80242	12,744	17,168	23,092
General Practice-MRP, NMajS	80275	19,248	26,272	35,336
General Practice-NMajS, prim.	80117	26,404	36,288	50,620
General Surgery-NMRP	84076	12,744	17,168	23,092
General Surgery-MRP, NMajS	82074	17,948	24,452	32,888
General Surgery	80143	36,808	50,860	70,948
Geriatrics	80243	9,492	12,616	16,968
Gynecology-NMRP, NS	81050	14,696	19,900	26,764
Gynecology/Obstetrics-MRP,NMaj	80277	22,500	30,828	41,464
Gynecological Surgery	86053	23,804	32,648	45,544
Hand Surgery-MRP, NMajS	82044	17,948	24,452	32,888
Hand Surgery	80169	23,804	32,648	45,544

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 3: REMAINDER OF STATE

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Head/Neck Surgery	80170	23,804	32,648	45,544
Hematology	80245	12,744	17,168	23,092
Hospitalist, Family Practice	81083	14,696	19,900	26,764
Hospitalist, Internal Medicine	81084	14,696	19,900	26,764
Hospitalist, Pediatrics	81085	14,696	19,900	26,764
Industrial Medicine	80233	12,744	17,168	23,092
Infectious Disease	80246	14,048	18,988	25,540
Internal Medicine-NMRP	80257	14,696	19,900	26,764
Internal Medicine-MRP	80284	17,948	24,452	32,888
Neonatology	83015	35,508	49,036	70,316
Nephrology-NMRP	80260	14,048	18,988	25,540
Nephrology-MRP	80287	15,996	21,720	29,212
Neurology	80261	17,948	24,452	32,888
Neurosurgery-NMRP,NMajS	81045	12,744	17,168	23,092
Neurosurgery-MRP,NMajS	82045	20,552	28,096	37,788
Neurosurgery-No Intracranial Surgery	86027	55,020	76,352	109,488
Neurosurgery	80152	83,636	116,416	171,596
Nuclear Medicine	80262	12,744	17,168	23,092
Obstetrical/Gynecological Surgery	80153	51,120	70,892	101,660
Occupational Medicine	80079	6,892	8,972	12,068
Oncology	80259	12,744	17,168	23,092
Ophthalmology-NS	80263	8,844	11,704	15,740
Ophthalmic Surgery	80114	12,744	17,168	23,092
Oral/Maxillofacial Surgery	86154	12,744	17,168	23,092
Orthopaedics-NMRP,NS	81057	12,744	17,168	23,092
Orthopaedics-MRP,NMajS	82025	17,948	24,452	32,888
Orthopaedic Surgery w/o Spine	86026	36,808	50,860	72,932
Orthopaedic Surgery w/Spine	80154	55,020	76,352	109,488
Otorhinolaryngology-NMRP,NS	80060	6,892	8,972	12,068
Otorhinolaryngology-MRP,NMajS	80291	17,948	24,452	32,888
Otorhinolaryngology; No Elective Plastic	80159	21,200	29,004	39,012
Otorhinolaryngology; Head/Neck	80155	23,804	32,648	45,544
Otorhinolaryngology; Other than Head/Neck	86155	35,508	49,036	70,316

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 3: REMAINDER OF STATE

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Pathology	80082	8,844	11,704	15,740
Pediatrics-NMRP	80267	8,844	11,704	15,740
Pediatrics-MRP	80293	17,948	24,452	32,888
Physical Med. & Rehab.	80235	6,892	8,972	12,068
Plastic Surgery	80156	35,508	49,036	70,316
Podiatry, No Surgery	86601	8,844	11,704	15,740
Podiatry, Surgery	86602	15,996	21,720	29,212
Psychiatry	80249	8,844	11,704	15,740
Public Health & Preventive Med	80236	6,892	8,972	12,068
Pulmonary Diseases	80269	15,996	21,720	29,212
Radiology-NMRP	80253	15,996	21,720	29,212
Radiology-MRP	80280	17,948	24,452	32,888
Radiology-MajRP	83033	22,500	30,828	41,464
Radiation Oncology	87047	11,444	15,348	20,644
Rheumatology	80252	9,492	12,616	16,968
Sleep Medicine	81086	14,696	19,900	26,764
Thoracic Surgery-NMRP, NS	81065	12,744	17,168	23,092
Thoracic Surgery	80144	47,216	65,428	93,824
Urological Surgery	80145	20,552	28,096	37,788
Urology-MRP, NMajS	82040	17,948	24,452	32,888
Vascular Surgery-MRP,NMajS	82050	17,948	24,452	32,888
Vascular Surgery	80146	47,216	65,428	93,824
Physician, Clinical Practice Not Insurable	80086	1,380	1,796	2,416
Retired, Not in Practice	80179	1,380	1,796	2,416
Physician, No Clinical Practice	80085	1,380	1,796	2,416
Phys. Treating Patients in Free Medical Clinic	81082	N/A	48	N/A

APPENDIX I

ANNUAL SEVENTH YEAR CLAIMS-MADE PREMIUM RATES - 10/1/12

TERRITORY 3: REMAINDER OF STATE

<u>MEDICAL SPECIALTY</u>	<u>CODE</u>	<u>500K/1.5M</u>	<u>1M/3M</u>	<u>2M/4M</u>
Other, Specialty NOC	80084	6,892	8,972	12,068
Other, Specialty NOC	88002	8,844	11,704	15,740
Other, Specialty NOC	88003	9,492	12,616	16,968
Other, Specialty NOC	80268	12,744	17,168	23,092
Other, Specialty NOC	88005	14,696	19,900	26,764
Other, Specialty NOC	88006	14,048	18,988	25,540
Other, Specialty NOC	88007	15,996	21,720	29,212
Other, Specialty NOC	80294	17,948	24,452	32,888
Other, Specialty NOC	88009	15,348	20,812	27,992
Other, Specialty NOC	88010	20,552	28,096	37,788
Other, Specialty NOC	83041	22,500	30,828	41,464
Other, Specialty NOC	84042	23,804	32,648	45,544
Other, Specialty NOC	88013	26,404	36,288	50,620
Other, Specialty NOC	88014	35,508	49,036	70,316
Other, Specialty NOC	85043	36,808	50,860	72,932
Other, Specialty NOC	88016	47,216	65,428	93,824
Other, Specialty NOC	86044	51,120	70,892	101,660
Other, Specialty NOC	88018	55,020	76,352	109,488
Other, Specialty NOC	88019	19,248	26,272	35,336
Other, Specialty NOC	87045	83,636	116,416	171,596
Other, Specialty NOC	88021	11,444	15,348	20,644
Other, Specialty NOC	88022	21,200	29,004	39,012
Other, Specialty NOC	88023	36,808	50,860	70,948

For Non-Standard, Use: 88046

FTE/Surgicenter Rates	basis code	count / FTE		rate per procedure/encounter	
				\$1M/\$3M	\$2M/\$4M
Emergency Medicine	80102	4,000	N/A	7.25	9.75
Anesthesiology	80151	800	N/A	26.02	34.99
Urgent Care	80239	6,000	N/A	2.86	3.85
Surgicenter	n/a	n/a	N/A	12.8	17.15

EXPLANATORY NOTES

EXPLANATORY NOTES:

- I. Territory 1** includes the Counties of Cook, Jackson, St. Clair, and Will.
- Territory 1A** includes the County of Vermilion.
- Territory 1B** includes the Counties of Kane, McHenry, and Winnebago.
- Territory 1C** includes the County of Madison.
- Territory 2** includes the Counties of Kankakee and Lake.
- Territory 2A** includes the Counties of Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, LaSalle, Macon, Ogle, and Randolph.
- Territory 2B** includes the County of Grundy.
- Territory 2C** includes the Counties of Adams, Knox, Peoria, and Rock Island.
- Territory 2D** includes the County of Sangamon.
- Territory 3** includes the remaining Counties in Illinois.

- II.** The following defines the medical procedure terms referenced in the listing of medical specialty designations/rates.

A. Specified Minor Risk Procedures (SMRP)

1. Cardiologists

Assisting in surgery, insertions of cardiac pacemaker (temporary or permanent), pericardiocentesis.

Cardiologists who perform the specified risk procedures listed will be rated accordingly. Performance of other minor risk procedures not specified will increase the premium charge.

B. Minor Risk Procedures (MRP)

Except as noted under A. 1, physicians with nominal specialty designation/risk notation of NMRP performing any of the following minor risk procedures will be assigned to a specialty designation/risk notation of MRP.

Interventional Cardiology

1. Angiography.
2. Arteriography.

ALLIED HEALTH PERSONNEL RATES

ISMIE MUTUAL ANNUAL ALLIED HEALTH PROFESSIONAL RATES - 10/01/12

SHARED LIMITS -- \$500K/\$1.5M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	716	648	616	748	580	516	480	348	416	384
APN Certified Nurse Anesthetist	10151	872	788	748	912	708	624	584	420	500	460
APN Certified Nurse Midwife	10153	10,056	9,068	8,572	10,548	8,076	7,088	6,596	4,616	5,608	5,112
APN Certified Nurse Practitioner	10239	716	648	616	748	580	516	480	348	416	384
Dialysis Tech	10260	792	716	680	828	644	568	532	384	460	420
Obstetrical RN (Other Than Nurse Midwife)*	12051	1,300	1,176	1,112	1,360	1,048	924	864	612	736	676
Orthopaedic Tech/Ortho RN	10154	2,156	1,948	1,840	2,264	1,736	1,524	1,420	1,000	1,208	1,104
Physician Assistant	10273	716	648	616	748	580	516	480	348	416	384
Psychologist	10249	480	436	416	500	396	352	328	244	288	264
Psychotherapist	11029	480	436	416	500	396	352	328	244	288	264
Social Worker	12028	480	436	416	500	396	352	328	244	288	264
Surgical Assistant/Technologist	12029	716	648	616	748	580	516	480	348	416	384

SEPARATE LIMITS -- \$500K/\$1.5M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	1,428	1,296	1,228	1,496	1,164	1,032	964	700	832	764
APN Certified Nurse Anesthetist	10151	1,740	1,576	1,496	1,824	1,412	1,248	1,168	840	1,004	920
APN Certified Nurse Midwife	10153	20,108	18,132	17,144	21,100	16,156	14,180	13,188	9,236	11,212	10,224
APN Certified Nurse Practitioner	10239	1,428	1,296	1,228	1,496	1,164	1,032	964	700	832	764
Chiropractor	12032	4,760	4,320	4,096	4,980	3,876	3,432	3,212	2,328	2,772	2,548
Critical Care Technician	12034	1,428	1,296	1,228	1,496	1,164	1,032	964	700	832	764
Dentist	12030	1,332	1,216	1,160	1,388	1,100	988	928	700	816	760
Dialysis Technician	10260	1,584	1,436	1,360	1,660	1,288	1,140	1,064	768	916	844
Obstetrical RN (Other Than Nurse Midwife)*	12051	2,600	2,348	2,224	2,724	2,100	1,848	1,724	1,224	1,476	1,352
Optometrist	12031	640	584	556	668	524	468	440	324	384	352
Orthopedic Technician/Nurse	10154	4,316	3,896	3,684	4,528	3,472	3,052	2,840	1,996	2,420	2,208
Pharmacist	12033	484	444	420	504	400	360	340	256	296	276
Physician Assistant	10273	1,428	1,296	1,228	1,496	1,164	1,032	964	700	832	764
Psychologist	10249	960	872	832	1,004	788	704	660	488	572	532
Psychotherapist	11029	960	872	832	1,004	788	704	660	488	572	532
Social Worker	12028	960	872	832	1,004	788	704	660	488	572	532
Surgical Assistant/Technologist	12029	1,428	1,296	1,228	1,496	1,164	1,032	964	700	832	764

***Not covered for intrapartum patient management**

Territory 1: Counties of Cook, Jackson, St. Clair and Will

Territory 1A: County of Vermilion

Territory 1B: Counties of Kane, McHenry, Winnebago

Territory 1C: County of Madison

Territory 2: Counties of Kankakee and Lake

Territory 2A: Counties of Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, LaSalle, Macon, Ogle, and Randolph

Territory 2B: County of Grundy

Territory 2C: Counties of Adams, Knox, Peoria and Rock Island

Territory 2D: County of Sangamon

Territory 3: Remainder of Illinois

ISMIE MUTUAL ANNUAL ALLIED HEALTH PERSONNEL RATES - 10/01/12

SHARED LIMITS -- \$1M/\$3M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	980	888	840	1,024	792	700	656	468	560	516
APN Certified Nurse Anesthetist	10151	1,196	1,084	1,024	1,256	968	852	796	568	680	624
APN Certified Nurse Midwife	10153	14,008	12,624	11,932	14,700	11,240	9,856	9,164	6,396	7,780	7,088
APN Certified Nurse Practitioner	10239	980	888	840	1,024	792	700	656	468	560	516
Dialysis Tech	10260	1,088	984	932	1,140	880	776	724	516	620	568
Obstetrical RN (Other Than Nurse Midwife)*	12051	1,800	1,624	1,536	1,888	1,448	1,276	1,188	836	1,012	924
Orthopaedic Tech/Ortho RN	10154	3,000	2,704	2,560	3,148	2,412	2,116	1,968	1,380	1,672	1,524
Physician Assistant	10273	980	888	840	1,024	792	700	656	468	560	516
Psychologist	10249	652	592	560	680	532	472	440	320	380	352
Psychotherapist	11029	652	592	560	680	532	472	440	320	380	352
Social Worker	12028	652	592	560	680	532	472	440	320	380	352
Surgical Assistant/Technologist	12029	980	888	840	1,024	792	700	656	468	560	516

SEPARATE LIMITS -- \$1M/\$3M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	1,960	1,772	1,680	2,052	1,588	1,400	1,308	936	1,124	1,032
APN Certified Nurse Anesthetist	10151	2,396	2,168	2,052	2,512	1,936	1,708	1,592	1,132	1,364	1,248
APN Certified Nurse Midwife	10153	28,020	25,252	23,868	29,404	22,484	19,716	18,332	12,796	15,564	14,180
APN Certified Nurse Practitioner	10239	1,960	1,772	1,680	2,052	1,588	1,400	1,308	936	1,124	1,032
Chiropractor	12032	6,528	5,912	5,600	6,840	5,292	4,672	4,364	3,124	3,744	3,432
Critical Care Technician	12034	1,960	1,772	1,680	2,052	1,588	1,400	1,308	936	1,124	1,032
Dentist	12030	1,788	1,628	1,548	1,868	1,468	1,308	1,228	908	1,068	988
Dialysis Technician	10260	2,176	1,968	1,864	2,280	1,764	1,556	1,452	1,036	1,244	1,140
Obstetrical RN (Other Than Nurse Midwife)*	12051	3,596	3,248	3,072	3,772	2,900	2,548	2,376	1,676	2,024	1,848
Optometrist	12031	868	788	748	908	708	628	588	428	508	468
Orthopedic Technician/Nurse	10154	6,000	5,412	5,116	6,296	4,820	4,232	3,936	2,756	3,348	3,052
Pharmacist	12033	652	592	564	680	532	476	448	328	388	360
Physician Assistant	10273	1,960	1,772	1,680	2,052	1,588	1,400	1,308	936	1,124	1,032
Psychologist	10249	1,304	1,184	1,124	1,364	1,064	944	884	644	764	704
Psychotherapist	11029	1,304	1,184	1,124	1,364	1,064	944	884	644	764	704
Social Worker	12028	1,304	1,184	1,124	1,364	1,064	944	884	644	764	704
Surgical Assistant/Technologist	12029	1,960	1,772	1,680	2,052	1,588	1,400	1,308	936	1,124	1,032

***Not covered for intrapartum patient n**

Territory 1: Counties of Cook, Jackson, St. Clair and Will

Territory 1A: County of Vermilion

Territory 1B: Counties of Kane, McHenry, Winnebago

Territory 1C: County of Madison

Territory 2: Counties of Kankakee and Lake

Territory 2A: Counties of Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, LaSalle, Macon, Ogle, and Randolph

Territory 2B: County of Grundy

Territory 2C: Counties of Adams, Knox, Peoria and

Territory 2D: County of Sangamon

Territory 3: Remainder of Illinois

ISMIE MUTUAL ANNUAL ALLIED HEALTH PERSONNEL RATES - 10/01/12

SHARED LIMITS -- \$2M/\$4M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	1,320	1,196	1,128	1,376	1,064	940	884	628	752	696
APN Certified Nurse Anesthetist	10151	1,608	1,456	1,376	1,688	1,300	1,144	1,072	764	916	840
APN Certified Nurse Midwife	10153	20,620	18,104	17,112	21,640	16,120	14,132	13,140	9,172	11,156	10,164
APN Certified Nurse Practitioner	10239	1,320	1,196	1,128	1,376	1,064	940	884	628	752	696
Dialysis Tech	10260	1,464	1,324	1,252	1,532	1,184	1,044	972	696	832	764
Obstetrical RN (Other Than Nurse Midwife)*	12051	2,420	2,184	2,064	2,540	1,948	1,716	1,596	1,124	1,360	1,244
Orthopaedic Tech/Ortho RN	10154	4,416	3,876	3,672	4,632	3,460	3,036	2,824	1,980	2,396	2,184
Physician Assistant	10273	1,320	1,196	1,128	1,376	1,064	940	884	628	752	696
Psychologist	10249	876	796	752	916	716	636	592	432	512	472
Psychotherapist	11029	876	796	752	916	716	636	592	432	512	472
Social Worker	12028	876	796	752	916	716	636	592	432	512	472
Surgical Assistant/Technologist	12029	1,320	1,196	1,128	1,376	1,064	940	884	628	752	696

SEPARATE LIMITS -- \$2M/\$4M

	CODE	Territory 1	Territory 1A	Territory 1B	Territory 1C	Territory 2	Territory 2A	Territory 2B	Territory 2C	Territory 2D	Territory 3
APN Certified Clinical Nurse Specialist	12035	2,636	2,384	2,260	2,760	2,136	1,884	1,760	1,260	1,512	1,388
APN Certified Nurse Anesthetist	10151	3,224	2,916	2,760	3,380	2,604	2,296	2,140	1,524	1,836	1,680
APN Certified Nurse Midwife	10153	41,244	36,212	34,228	43,284	32,244	28,272	26,288	18,348	22,320	20,336
APN Certified Nurse Practitioner	10239	2,636	2,384	2,260	2,760	2,136	1,884	1,760	1,260	1,512	1,388
Chiropractor	12032	8,780	7,952	7,532	9,200	7,116	6,284	5,868	4,200	5,036	4,616
Critical Care Technician	12034	2,636	2,384	2,260	2,760	2,136	1,884	1,760	1,260	1,512	1,388
Dentist	12030	2,404	2,188	2,084	2,512	1,976	1,760	1,652	1,220	1,436	1,328
Dialysis Technician	10260	2,928	2,648	2,508	3,068	2,372	2,092	1,952	1,392	1,672	1,532
Obstetrical RN (Other Than Nurse Midwife)*	12051	4,836	4,368	4,132	5,072	3,900	3,428	3,196	2,256	2,724	2,484
Optometrist	12031	1,168	1,060	1,008	1,220	952	844	792	576	684	628
Orthopedic Technician/Nurse	10154	8,832	7,760	7,336	9,268	6,912	6,068	5,644	3,952	4,800	4,376
Pharmacist	12033	876	796	760	916	716	640	604	440	520	484
Physician Assistant	10273	2,636	2,384	2,260	2,760	2,136	1,884	1,760	1,260	1,512	1,388
Psychologist	10249	1,752	1,592	1,512	1,836	1,432	1,268	1,188	868	1,028	948
Psychotherapist	11029	1,752	1,592	1,512	1,836	1,432	1,268	1,188	868	1,028	948
Social Worker	12028	1,752	1,592	1,512	1,836	1,432	1,268	1,188	868	1,028	948
Surgical Assistant/Technologist	12029	2,636	2,384	2,260	2,760	2,136	1,884	1,760	1,260	1,512	1,388

*Not covered for intrapartum patient management

Territory 1: Counties of Cook, Jackson, St. Clair and Will

Territory 1A: County of Vermilion

Territory 1B: Counties of Kane, McHenry, Winne

Territory 1C: County of Madison

Territory 2: Counties of Kankakee and Lake

Territory 2A: Counties of Bureau, Champaign, Coles, DeKalb, DuPage, Effingham, LaSalle, Macon, Ogle, and Randolph

Territory 2B: County of Grundy

Territory 2C: Counties of Adams, Knox, Peoria and Rock Island

Territory 2D: County of Sangamon

Territory 3: Remainder of Illinois

Policyholder Risk Improvement Plan

- A.** The Policyholder Risk Improvement plan is a fundamental element in the ISMIE Mutual Professional Liability Program. It establishes a review format for professional risk evaluation of physicians, by physicians, and provides an effective risk control mechanism for mitigating potential loss exposures. The objective of the Plan is to encourage insured physicians to maintain high professional standards, thereby ensuring quality patient care and the stability of this professional liability program.
- B.** The following characteristics shall be considered in determining individualized efforts to improve risk through the educational component of the plan and assessment of risk surcharges (i.e., percentage increase of standard premium) under the ISMIE Mutual Professional Liability Program:

<u>CHARACTERISTICS</u>	<u>TIER EVALUATION</u>
<p>1. Physician insured 10 or more years with one claim closed with indemnity paid which the Physician Review and Evaluation Panel ("PREP") determines reflects a breach of the standard of care but does not rise to the level of negligence, and claim frequency (as determined by specialty) is less than 2x average, no surcharge history for the most recent 10-year period, no pending cases in a settlement posture, and no other adverse characteristics such as excessive patient volume or other negative practice patterns are identified by "PREP". Or any claim closed with indemnity during any insured period that is considered a recognized complication, isolated error or represents marginal culpability as determined by "PREP".</p>	<p>Tier 1 - Educational component</p>

APPENDIX III

<u>CHARACTERISTICS</u>	TIER EVALUATION
<p>2. Physician insured for any period with one claim that the Physician Review and Evaluation Panel ("PREP") determines reflects a breach of the standard of care, and claim profile reflects any one, or a combination of, the following: claim frequency 2x or greater than average (as determined by specialty), previous surcharge history during the most recent 10-year period, more than one case closed with indemnity paid during the most recent 10 years, pending claim(s) in a settlement posture, or other adverse risk characteristics, such as excessive patient volume or other negative practice patterns as determined by "PREP".</p>	<p>Tier 2 -10% Surcharge</p>
<p>3. Physician insured for any period with a one claim that the Physician Review and Evaluation Panel ("PREP") determines reflects a significant breach of the standard of care or multiple claims representing a breach of the standard of care, or claim (s) representing a pattern of questionable judgment, poor surgical skills or a pattern of significant lapses in documentation or office procedures as determined by "PREP".</p>	<p>Tier 3 - 25% Surcharge</p>
<p>4. Physician insured for any period with any claim that the Physician Review and Evaluation Panel ("PREP") determines reflects negligent care, or claim profile that reflects any one or a combination of the following: claim frequency 4x or greater than average, lack of overall competency, practice in an area significantly beyond training or competency, excessive practice locations, alteration of medical records, failure to comply with ISMIE risk management recommendations, or any other adverse underwriting characteristics such as hospital staff privileges disciplinary action or Licensing Board disciplinary action, as determined by "PREP".</p>	<p>Tier 4 - 50% surcharge</p>

- C.** A Tier 1 evaluation represents the educational component of the Plan. Under Tier 1, the Physician Review and Evaluation Panel ("PREP") may require participation in an ISMIE sponsored risk management course and/or Continuing Medical Education (CME) to improve the policyholder's risk. Additionally, "PREP" may also recommend the educational component when a surcharge is assessed. The surcharge percents outlined in Tiers 2, 3, and 4 are applied to the insured's standard premium, determined in accordance with the rating rules of this manual. The percentage (%) is always applied to the insured's annual base premium. Part-time rating, suspended coverage, the newly practicing physician discount, or subsequent procedure reduction shall not operate to decrease the amount of the surcharge otherwise due.
- D.** The following rules govern the application and duration of surcharges and policy exclusions established through the Surcharge Plan:
1. A surcharge may be applied at the inception of the policy or at any subsequent policy renewal thereafter.
 2. Ultimate disposition of a previously evaluated "open" claim shall not affect the originally assessed surcharge.
 3. Surcharges shall remain in effect in accordance with the following table:

<u>SURCHARGE %</u>	<u>DURATION</u>
10% and 25%	12 Months
50%	24 Months
	Subject to reevaluation by "PREP" at the expiration of 24 months.

4. The educational component of the Plan as well as imposition of surcharges and other indicated actions may be accomplished by the Physician Review and Evaluation Panel ("PREP") which serves as consultant to the Underwriting Division. Surcharges and other indicated actions may only be reconsidered bi-annually by the originating source or may be reviewed by "PREP" in accordance with the following note below, providing the applicant or insured requests such reconsideration or review in writing within six months following notification by the Company.

NOTE: The insured is obliged to make payment of the surcharge during the pendency of the reconsideration or review process. If the surcharge is eliminated or reduced, the decision shall be applied retroactive to the original effective date.

5. The imposition of a surcharge disqualifies insureds from receiving any discount offered to participants of a group program (e.g., IPA, network, or purchasing group).

APPENDIX III

6. A medical procedure exclusion, practice activity exclusion, and/or a curtailment of policy limits of liability may be imposed at the inception of the policy or any policy renewal thereafter. Any of these actions qualifies for review by the Physician Review and Evaluation Panel ("PREP"), provided the insured requests such reconsideration in writing within six months following notification by the Company.

NOTE: These kinds of coverage restrictions are generally intended to apply for an indefinite period. However, in the case of a medical procedure exclusion, after the exclusion has been in effect for a minimum of six (6) months, the insured may request consideration for removal of the exclusion upon furnishing satisfactory evidence of retraining or other appropriate medical testimony. Such a request may only be made once in any twelve (12) month period.

- E. At its discretion, the Physician Review and Evaluation Panel ("PREP") may recommend any ISMIE Mutual Risk Management or continuing Medical Education activity in addition to a surcharge and/or medical procedure exclusion.

GENERAL STATEMENT

The provisions of this plan affect the underwriting treatment of both new applicants and existing policyholders. In the case of a new applicant who has been declined by either the Underwriting Division or the Physician Review and Evaluation Panel ("PREP"), depending on the reason(s) for declination, the opportunity may be extended to the applicant to meet personally with "PREP" in order to review the declination decision. "PREP" may overturn, or otherwise modify an Underwriting Division decision but only in accordance with the procedure outlined in the "PREP" Administrative Rules.

Any existing policyholder subject to policy cancellation or non-renewal may, depending on the reason(s) for policy cancellation or non-renewal and upon timely request, be granted the opportunity to request an appeal. Such request for appeal shall be heard by a Committee appointed by ISMIE Mutual's Board of Directors. The outcome of this review shall be binding on both the policyholder and ISMIE Mutual.

APPENDIX IV

I. PHYSICIAN CLINIC (Cont'd.)	debit	credit
II. Organizational Structure and Size: maximum debit/credit of combined items a through e.	10%	-10%
a. Group delivers quality care in the context of the group's economy of scale.	3%	-3%
b. Existence of a Quality Review Committee which considers outcomes of patient treatment, as well as unexpected results and integrates solutions into the group's practice protocols.	5%	-5%
c. Existence of a committee which reviews medical utilization, existing and anticipated treatment protocols and clinical guidelines and enforces compliance within the group.	5%	-5%
d. Ongoing process, with adequate resources, for the care and maintenance of premises and equipment.	2%	-2%
e. Established budgetary process for the expected replacement of premises and equipment.	2%	-2%
III. Patient Rapport: maximum debit/credit of combined Items a through h.	10%	-10%
a. Tenure of professional activities by physicians and non-physicians: both professionally and within the group.	5%	-5%
b. Group's reputation within the community and service area.	3%	-3%
c. Office hours and availability of physicians and non-physicians at other times and weekends.	2%	-2%
d. Patient surveys: performed and results integrated into the group's practice protocols.	3%	-3%
e. Patient complaints: accepted, analyzed and results integrated into the group's practice protocols.	3%	-3%
f. Degree to which hospitalists and/or laborists are utilized for the group's patients.	2%	-2%
g. Patient volume is reasonable in context of group size, geography and patient mix.	5%	-5%
h. Reimbursement mix: Medicare, Medicaid, private insurance company, HMO.	3%	-3%
IV. Classification Anomalies		
a. Differentiation of the insured from other members of the same class and type of risk, which is expected to impact future loss experience.	3%	-3%
V. Claim Anomalies		
a. Any economic, societal, jurisdictional changes which impact the frequency and/or severity of losses. Any circumstances which either overstate or understate the ultimate severity in losses.	3%	-3%
6. Full-Time Dedicated Risk Manager	0%	-5%

APPENDIX V

I. PHYSICIAN GROUP RATING DEVIATION (Cont'd.)

D. (Cont'd).	debit	credit
III. Patient Rapport: maximum debit/credit of combined Items a through h.	10%	-10%
a. Tenure of professional activities by physicians and non-physicians: both professionally and within the group.	5%	-5%
b. Group's reputation within the community and service area.	3%	-3%
c. Office hours and availability of physicians and non-physicians at other times and weekends.	2%	-2%
d. Patient surveys: performed and results integrated into the group's practice protocols.	3%	-3%
e. Patient complaints: accepted, analyzed and results integrated into the group's practice protocols.	3%	-3%
f. Degree to which hospitalists and/or laborists are utilized for the group's patients.	2%	-2%
g. Patient volume is reasonable in context of group size, geography and patient mix.	5%	-5%
h. Reimbursement mix: Medicare, Medicaid, private insurance company, HMO.	3%	-3%
IV. Classification Anomalies		
a. Differentiation of the insured from other members of the same class and type of risk, which is expected to impact future loss experience.	3%	-3%
V. Claim Anomalies		
a. Any economic, societal, jurisdictional changes which impact the frequency and/or severity of losses. Any circumstances which either overstate or understate the ultimate severity in losses.	3%	-3%
6. Full-Time Dedicated Risk Manager	0%	-5%

August 10, 2012

Mr. Andrew Boron, Director
Illinois Department of Insurance
Property and Casualty Compliance Section
320 West Washington Street
Springfield, Illinois 62767-0001

RE: ISMIE Mutual Insurance Company
Filing Number: ISMIE 0000-69
FEIN: 36-2883612

Rate and Rule Filing Effective October 1, 2012

Dear Director Boron:

The accompanying materials constitute a filing of medical liability insurance rules and rates made on behalf of the ISMIE Mutual Insurance Company in accordance with the requirements of Section 155.18 of the Illinois Insurance Code.

All policyholders with ISMIE Mutual are insured on an annual basis. This filing, which is effective October 1, 2012, supersedes our present filing and applies to all policies issued or renewed October 1, 2012 and after.

This rate and rule filing consists of the following enclosed documents:

- 1) Rate/Rule Submission Letter;
- 2) Form RF-3;
- 3) Revised pages of the "Manual of Rules and Rates";
- 4) Towers Watson report entitled, "ISMIE Mutual Insurance Company Filing Memorandum – Illinois Physicians and Surgeons Professional Liability"; and,
- 5) "Statement of Actuarial Opinion".

RATES

The rates attached were adopted by the Board of Directors of ISMIE Mutual Insurance Company on June 29, 2012. At this meeting, the Board also adopted the following:

- 1) Change the relativity for Geriatrics (80243) from .55 to .60 by moving the specialty code from Class 2 to Class 3;
- 2) Change the relativity for Rheumatology (80252) from .55 to .60 by moving the specialty code from Class 2 to Class 3;
- 3) Change the relativity for Pediatrics-NMRP (80267) from .60 to .55 by moving the specialty code from Class 3 to Class 2;
- 4) Change the relativity for Class 12 from 1.80 to 1.70;
- 5) Change the relativity for Class 14 from 2.70 to 2.60;
- 6) Change the relativity for Class 15 from 2.90 to 2.70;

- 7) Change the relativity for Madison County from 1.00 to 1.05 by creating a new Territory 1C consisting solely of Madison County;
- 8) Change the relativity for Kankakee County by changing the Territory 2 relativity from .75 to .80;
- 9) Change the relativity for Lake County from .85 to .80 by moving it to Territory 2; and,
- 10) Change the relativity for Grundy County by changing the Territory 2B relativity from .60 to .65.

RULES

The "Manual of Rules and Rates" constitutes the rules, policies and procedures applicable to the insurance granted to each policy under this program.

The following changes have been made to this manual effective October 1, 2012:

Table of Contents

The table has been updated to reflect the effective date of October 1, 2012 and the current page numbers.

General Rules

Page 1.....The effective date has been changed to October 1, 2012.

Pages 23 to 24....The list of Endorsements and Forms has been updated.

Appendix I

Pages 1 to 40.....The Rate Chart has been updated.

Page 2.....The territory definitions have been updated under item I.

Pages 1 to 3.....The AHP Rate Chart has been updated.

Appendix II

No changes have been made.

Appendix III

Pages 1 to 4.....The title of this section has been changed to "Policyholder Risk Improvement Plan."
Adjustments have been made to the following paragraphs: A., B., C., D. 3. and 4. and the surcharge percentage in each tier has been reduced.

Appendix IV

Page 5.....The full-time dedicated Risk Manager credit has been moved from section D. 5. IV to D. 6.

Appendix V

Page 4.....The full-time dedicated Risk Manager credit has been moved from section D. 5. IV to D. 6.

In further compliance with the requirements of the Illinois Insurance Code, Section 155.18 (c)(3) and the Illinois Insurance Regulations, Section 929.30 (b)(1)(E), I certify, as an officer of the ISMIE Mutual Insurance Company, that to the best of my knowledge, the rates in this filing are based on sound actuarial principles and are not inconsistent with the experience of ISMIE Mutual.

Additionally, ISMIE Mutual gathers statistics which we supply to our actuaries for rate making purposes, but does not report to, or use, a rating agency.

Please contact Alan J. Allphin, Vice President, Underwriting at (312) 580-2432 or at alanallphin@ismie.com if you have any questions.

Sincerely,

A handwritten signature in dark ink, appearing to read "John Washburn", with a long horizontal flourish extending to the right.

John Washburn
Senior Vice President

cc: Alexander R. Lerner
Jeffery M. Holden
Richard King
Cheryl Koos
Alan Allphin

Attachments

APPENDIX III

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Policyholder Risk Improvement Plan ~~RISK CHARACTERISTIC SURCHARGE PLAN~~

- A. The Policyholder Risk Improvement ~~Risk Characteristic surcharge~~ plan is a fundamental element in the ISMIE Mutual Professional Liability Program. It establishes a review format for professional risk evaluation of physicians, by physicians, and provides an effective risk control mechanism for mitigating potential loss exposures. The objective of the ~~Surcharge~~ Plan is to encourage insured physicians to maintain high professional standards, thereby ensuring quality patient care and the stability of this professional liability program.
- B. The following characteristics shall be considered in determining individualized efforts to improve -risk through the educational component of the plan and assessment of risk surcharges and physician group debits (i.e., percentage increase of standard premium) under the ISMIE Mutual Professional Liability Program:

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APPENDIX III

4. Physician insured for any period with any claim that PREP determines reflects negligent care, or claim profile that reflects any one or a combination of the following: claim frequency 4x or greater than average, lack of overall competency, practice in an area significantly beyond training or competency, excessive practice locations, alteration of medical records, failure to comply with ISMIE risk management recommendations, or any other adverse underwriting characteristics such as hospital staff privileges disciplinary action or Licensing Board disciplinary action, as determined by PREP. ~~A pattern of claims reflecting inappropriate medical care; including practicing outside of one's specialty; excessive patient volume or other practice patterns which compromise quality of care; or a pattern of cases reflecting a significant breach in the standard of care regardless of ultimate disposition as determined by the Physician Review and Evaluation Panel ("PREP") or any other adverse risk characteristics as determined by PREP which represents a significant exposure, combined with claim frequency as determined by specialty, and a loss ratio of 120% or greater.~~

Tier 4- 50% surcharge

- C. ~~A Tier 1 evaluation represents the educational component of the Plan. Under a Tier 1, PREP may require participation in an ISMIE sponsored risk management course and/or Continuing Medical Education (CME) to improve the policyholder's risk. Additionally, PREP may also recommend the educational component when a surcharge is assessed. The following table converts the Tier Evaluation to the surcharge~~ ~~percent~~s outlined in Tiers 2, 3, and 4 that is to be applied to the insured's standard premium, determined in accordance with the rating rules of this manual. The percentage (%) is always applied to the insured's annual base premium. Part-time rating, suspended coverage, the newly practicing physician discount, or subsequent procedure reduction shall not operate to decrease the amount of the surcharge otherwise due.

TIER:	1	2	3	4
PERCENTAGE (%):	25%	50%	75%	100%

- D. The following rules govern the application and duration of surcharges and policy exclusions established through the Surcharge Plan:

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1. A surcharge may be applied at the inception of the policy or at any subsequent policy renewal thereafter.
2. Ultimate disposition of a previously evaluated "open" claim shall not affect the originally assessed surcharge.

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(Edition Date: 10/1/4412)

APPENDIX III

3. Surcharges shall remain in effect in accordance with the following table:

SURCHARGE %	DURATION
10% and 25%	12 Months
50%	24 Months <u>24 Months minimum, subject to reevaluation by "PREP" at the expiration of 24 months.</u>
75%	<u>24 Months minimum, subject to reevaluation by "PREP" at the expiration of 24 months.</u>
100%	<u>24 Months minimum, subject to re-evaluation by "PREP" at the expiration of 12 months.</u>

4. The educational component of the Plan as well as imposition of surcharges and other indicated actions may be accomplished by the Physician Review and Evaluation Panel ("PREP") which serves as consultant to the Underwriting Division. Surcharges and other indicated actions may only be reconsidered bi-annually by the originating source or may be reviewed by "PREP" in accordance with the following note below, providing the applicant or insured requests such reconsideration or review in writing within six months following notification by the Company.

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NOTE: The insured is obliged to make payment of the surcharge during the pendency of the reconsideration or review process. If the surcharge is eliminated or reduced, the decision shall be applied retroactive to the original effective date.

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5. The imposition of a surcharge disqualifies insureds from receiving any discount offered to participants of a group program (e.g., IPA, network, or purchasing group).
6. A medical procedure exclusion, practice activity exclusion, and/or a curtailment of policy limits of liability may be imposed at the inception of the policy or any policy renewal thereafter. Any of these actions qualifies for review by the "PREP" Committee, provided the insured requests such reconsideration in writing within six months following notification by the Company.

NOTE: These kinds of coverage restrictions are generally intended to apply for an indefinite period. However, in the case of a medical procedure exclusion, after the exclusion has been in effect for a minimum of six (6) months, the insured may request consideration for removal of the exclusion upon furnishing satisfactory evidence of retraining or other appropriate medical testimony. Such a request may only be made once in any twelve (12) month period.

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APPENDIX III

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- E. At its discretion, PREP may recommend any ISMIE Mutual Risk Management or continuing Medical Education activity in addition to a surcharge and/or medical procedure exclusion.

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GENERAL STATEMENT

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The provisions of this plan affect the underwriting treatment of both new applicants and existing policyholders. In the case of a new applicant who has been declined by either the Underwriting Division or "PREP", depending on the reason(s) for declination, the opportunity may be extended to the applicant to meet personally with "PREP" in order to review the declination decision. "PREP" may overturn, or otherwise modify an Underwriting Division decision but only in accordance with the procedure outlined in the PREP Committee Administrative Rules.

Any existing policyholder subject to policy cancellation or non-renewal may, depending on the reason(s) for policy cancellation or non-renewal and upon timely request, be granted the opportunity to request an appeal. Such request for appeal shall be heard by a Committee appointed by ISMIE Mutual's Board of Directors. The outcome of this review shall be binding on both the policyholder and ISMIE Mutual.

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August 10, 2012

Mr. Andrew Boron, Director
Illinois Department of Insurance
Property and Casualty Compliance Section
320 West Washington Street
Springfield, Illinois 62767-0001

RE: ISMIE Mutual Insurance Company
Filing Number: ISMIE 0000-69
FEIN: 36-2883612

Rate and Rule Filing Effective October 1, 2012

Dear Director Boron:

The accompanying materials constitute a filing of medical liability insurance rules and rates made on behalf of the ISMIE Mutual Insurance Company in accordance with the requirements of Section 155.18 of the Illinois Insurance Code.

All policyholders with ISMIE Mutual are insured on an annual basis. This filing, which is effective October 1, 2012, supersedes our present filing and applies to all policies issued or renewed October 1, 2012 and after.

This rate and rule filing consists of the following enclosed documents:

- 1) Rate/Rule Submission Letter;
- 2) Form RF-3;
- 3) Revised pages of the "Manual of Rules and Rates";
- 4) Towers Watson report entitled, "ISMIE Mutual Insurance Company Filing Memorandum – Illinois Physicians and Surgeons Professional Liability"; and,
- 5) "Statement of Actuarial Opinion".

RATES

The rates attached were adopted by the Board of Directors of ISMIE Mutual Insurance Company on June 29, 2012. At this meeting, the Board also adopted the following:

- 1) Change the relativity for Geriatrics (80243) from .55 to .60 by moving the specialty code from Class 2 to Class 3;
- 2) Change the relativity for Rheumatology (80252) from .55 to .60 by moving the specialty code from Class 2 to Class 3;
- 3) Change the relativity for Pediatrics-NMRP (80267) from .60 to .55 by moving the specialty code from Class 3 to Class 2;
- 4) Change the relativity for Class 12 from 1.80 to 1.70;
- 5) Change the relativity for Class 14 from 2.70 to 2.60;
- 6) Change the relativity for Class 15 from 2.90 to 2.70;

- 7) Change the relativity for Madison County from 1.00 to 1.05 by creating a new Territory 1C consisting solely of Madison County;
- 8) Change the relativity for Kankakee County by changing the Territory 2 relativity from .75 to .80;
- 9) Change the relativity for Lake County from .85 to .80 by moving it to Territory 2; and,
- 10) Change the relativity for Grundy County by changing the Territory 2B relativity from .60 to .65.

RULES

The "Manual of Rules and Rates" constitutes the rules, policies and procedures applicable to the insurance granted to each policy under this program.

The following changes have been made to this manual effective October 1, 2012:

Table of Contents

The table has been updated to reflect the effective date of October 1, 2012 and the current page numbers.

General Rules

Page 1.....The effective date has been changed to October 1, 2012.

Pages 23 to 24....The list of Endorsements and Forms has been updated.

Appendix I

Pages 1 to 40.....The Rate Chart has been updated.

Page 2.....The territory definitions have been updated under item I.

Pages 1 to 3.....The AHP Rate Chart has been updated.

Appendix II

No changes have been made.

Appendix III

Pages 1 to 4.....The title of this section has been changed to "Policyholder Risk Improvement Plan."
Adjustments have been made to the following paragraphs: A., B., C., D. 3. and 4. and the surcharge percentage in each tier has been reduced.

Appendix IV

Page 5.....The full-time dedicated Risk Manager credit has been moved from section D. 5. IV to D. 6.

Appendix V

Page 4.....The full-time dedicated Risk Manager credit has been moved from section D. 5. IV to D. 6.

In further compliance with the requirements of the Illinois Insurance Code, Section 155.18 (c)(3) and the Illinois Insurance Regulations, Section 929.30 (b)(1)(E), I certify, as an officer of the ISMIE Mutual Insurance Company, that to the best of my knowledge, the rates in this filing are based on sound actuarial principles and are not inconsistent with the experience of ISMIE Mutual.

Additionally, ISMIE Mutual gathers statistics which we supply to our actuaries for rate making purposes, but does not report to, or use, a rating agency.

Please contact Alan J. Allphin, Vice President, Underwriting at (312) 580-2432 or at alanallphin@ismie.com if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "John Washburn", with a long horizontal flourish extending to the right.

John Washburn
Senior Vice President

cc: Alexander R. Lerner
Jeffery M. Holden
Richard King
Cheryl Koos
Alan Allphin

Attachments

Specialty, Full Description	Code	Class	Relativity Change
Emergency Medicine-MajS	80157	12	1.80 to 1.70
Gynecological Surgery	86053	12	
Hand Surgery	80169	12	
Head/Neck Surgery	80170	12	
Otorhinolaryngology; Head/Neck	80155	12	
Neonatology	83015	14	2.70 to 2.60
Otorhinolaryngology; Other than Head/Neck	86155	14	
Plastic Surgery	80156	14	2.90 to 2.70
Orthopaedic Surgery w/o Spine	86026	15	

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